PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT 02-03

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 MAY 14 PM 12:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000014498

1. Corporation Name
LA GRAN PARADA DOMINICANA RESTAURANT INC.

2. Principal Office Address		**3.** Mailing Office Address	
615 East 29 Street		615 East 29 Street	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State: Hialeah Florida		City & State: Hialeah Florida	
Zip: 33013	Country: U.S.A.	Zip: 33013	Country: U.S.A.

4. Date Incorporated or Qualified To Do Business in Florida: 02/10/2000

5. FEI Number: 65-0979654 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: SOQUIER, SANTA M.

Street Address (P.O. Box Number is Not Acceptable): 615 East 29 Street

300018939623
05/14/03--01050--008 **300.00

Suite, Apt. #, Etc.:

City: Hialeah Florida | State: FL | Zip Code: 33013

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: X Santa Melania Soquier — Date: 5/8/2003
REGISTERED AGENT MUST SIGN

CR2E081 (10/02)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	SOQUIER, SANTA M.	615 East 29 Street	Hialeah Florida 33013

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: X Santa Melania Soquier — SANTA M. SOQUIER — 5/8/2003 — (305) 691-2084
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

JI 5/21

May 7, 2003

Ref: La Gran Parada Dominicana Corp.
P00000014498
Reinstatement
ID# 60-0979604

Division of Corporations
Tallahassee, Fla.
Reinstatement Section

Gentleman: Find enclosed my Corporation Reinstatement Form filled out, and a check for $300.00 to make active this Corporation. I am sorry for this inconvenience, but I have never received any Communication at respect, or any prior notice, I just find out when I went to open my banks account for the business, please take care of this situation for me, and I appreciate your help, this is not going to happen to me again, I am more aware of this Annual Report payment.

Sincerely yours,

Santa Melania Soquir