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04 JAN -5 AM 9:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>CORPORATION REINSTATEMENT</b> 		<b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>PO1000112938</u>			
1. Corporation Name <u>ARGOS Management Company, Inc</u> <u>345 Ocean Drive # 909</u> <u>Miami Beach, FL 33139</u>			
2. Principal Office Address <u>345 Ocean Drive</u> Suite, Apt. #, etc. <u>909</u>		3. Mailing Office Address <u>345 Ocean Drive</u> Suite, Apt. #, etc. <u>909</u>	
City & State <u>Miami Beach, FL</u>		City & State <u>Miami Beach, FL</u>	
Zip <u>33139</u>	Country <u>USA</u>	Zip <u>33139</u>	Country <u>USA</u>
4. Date Incorporated or Qualified To Do Business in Florida <u>11/28/2001</u>		5. FEI Number <u>65-1155604</u>	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status	

REINSTATEMENT

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05-05-03 91789 034 \$150.00

7. Name and Address of Current Registered Agent

Name Jazmin Ascencios

Street Address (P.O. Box Number is Not Acceptable)  
345 Ocean Drive

Suite, Apt. #, Etc. 909

City Miami Beach State FL Zip Code 33139

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 [Signature] Date 12/26/03

REGISTERED AGENT MUST SIGN

CR2061 (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
<u>P</u> <u>President</u>	<u>Jazmin Ascencios</u>	<u>345 Ocean Drive</u>	<u>Miami Beach FL 33139</u>
<u>S</u> <u>Secretary</u>	<u>Jazmin Ascencios</u>	<u>345 Ocean Drive</u>	<u>Miami Beach FL 33139</u>
<u>T</u> <u>Treasurer</u>	<u>Deigo Suarez</u>	<u>345 Ocean Drive</u>	<u>Miami Beach FL 33139</u>

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: [Signature] Date 12/26/03 Daytime Phone # \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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**Argos Management Company, Inc**  
**345 Ocean Drive Apt 909**  
**Miami Beach, FL 33139**

To Dept of Revenue:

In reviewing Sunbiz.org I noticed that my company had been administratively dissolved. I called and discussed this and a representative told me that you sent a letter seeking information, but as I have