

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1092

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

04 MAY -6 PM 6:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** P02000010881

1. Corporation Name  
PANORAMA HISPANO-AMERICANO, INC.

600035553846  
05/06/04--01012--031 \*\*300.00

0304

2. Principal Office Address 11331 S.W. 160 CT. Suite, Apt. #, etc.		3. Mailing Office Address P.O. BOX 522451 Suite, Apt. #, etc.	
City & State MIAMI, FLORIDA		City & State MIAMI, FLORIDA	
Zip 33116	Country USA	Zip 33152	Country USA

4. Date Incorporated or Qualified To Do Business in Florida JAN. 24, 2002	
5. FEI Number 75-3002206	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

**7. Name and Address of Current Registered Agent**

Name GLOBAL MANAGEMENT VENTURES, INC.	
Street Address (P.O. Box Number is Not Acceptable) 9391 N.W. 13 STREET	
Suite, Apt. #, Etc.	
City MIAMI, FLORIDA	State FL
	Zip Code 33172

**REINSTATEMENT**

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: 4/28/04

REGISTERED AGENT MUST SIGN

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
PTD	JAIME GUEITS RIVERA	11331 S.W. 160 CT.	MIAMI, FLORIDA 33116
SD	(LIZ REY) <i>Elizabeth Rey</i>	14000 S.W. 111 STREET	MIAMI, FLORIDA 33186

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: *Elizabeth Rey* (LIZ REY) Date: 4/28/04 305-775-5245

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2003 (01/04)

B

2002

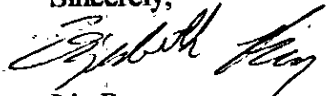
Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: Corporate reinstatement-PANORAMA HISPANO-AMERICANO, INC.  
#PO2000010881

This letter is to certify that we have no record or having received the corporate reporting notification, causing the non-filing and subsequent administrative dissolution in 2003.

Enclosed please find our check to cover filings for 2003 and the current year 2004 and trust that you will wave the additional filing fees.

Sincerely,



Liz Rey  
Secretary