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05 APR 15 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000033021

1. Corporation Name
PORCAO USA, INC.

2. Principal Office Address Av. das Americas 500		3. Mailing Office Address Av. das Americas 500	
Suits, Apt. #, etc. Bloco 14, si 103		Suits, Apt. #, etc. Bloco 14, si 103	
City & State Rio de Janeiro - RJ		City & State Rio de Janeiro - RJ	
Zip 22640-102	Country BRAZIL	Zip 22640-102	Country BRAZIL

4. Date Incorporated or Qualified To Do Business In Florida **04/26/2002**

5. FEI Number Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED

03-05/18 [Signature]

7. Name and Address of Current Registered Agent

Name
CT CORPORATION SYSTEM

Street Address (P.O. Box Number is Not Acceptable)
1200 SOUTH PINE ISLAND ROAD

Suits, Apt. #, Etc.

City
PLANTATION

State
FL

Zip Code
33324

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: APR 15 2005

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
CEO	Mocellin, Valdir Jose	Av das Americas 500 Bloco 14 si 103	Rio de Janeiro/RJ/22640-102
D	Mocellin, Neodi Luis	Av das Americas 500 Bloco 14 si 103	Rio de Janeiro/RJ/22640-102
D	Mocellin, Aldomir	Av das Americas 500 Bloco 14 si 103	Rio de Janeiro/RJ/22640-102
D	Mocellin, Darci Roque	Av das Americas 500 Bloco 14 si 103	Rio de Janeiro/RJ/22640-102
D	Mocellin, Nedio Jose	Av das Americas 500 Bloco 14 si 103	Rio de Janeiro/RJ/22640-102

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)(f), F.S. The information indicated on this application is true and correct.

SIGNATURE: [Signature]

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

[Signature]

APR-18-2005 15:33

CT CORPORATION

2nd 3



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 15, 2005

PORCAO USA, INC.
7345 SAND LAKE ROAD
SUITE 202
ORLANDO, FL 32819

SUBJECT: PORCAO USA, INC.
REF: P02000033021

We have received your document for PORCAO USA, INC. and check(s) totaling \$1058.75. However, your check(s) and document are being returned for the following:

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800)829-1040.

Fixed

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Marquitta Williams
Document Specialist

FAX Aud. #: H05000093535
Letter Number: 905A00026045

Florida Department of State
Division of Corporations
Public Access System

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 Account Number : PCA000000023
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 Fax Number : (850)222-9428

*Please file 1st
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 Thanks!
 Jennifer*

CORPORATION REINSTATEMENT

PORCAO USA, INC.

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