

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED AND FILED

98 MAR -5 AM 8:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000039998

1. Corporation Name
TAP HOLDINGS, INC.

Principal Place of Business TAP HOLDINGS, INC. C/O Sergio R. Penton, PA. 3191 Coral Way Suite # 200 Miami, Florida 33145	Mailing Address SAME AS PRINCIPAL PLACE OF BUSINESS
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If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5/26/1994	
City & State		City & State		5. FEI Number	
Zip		Country		59-222802	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/S/D	Modesto Echezarreta	1740 S. Bayshore Lane	Miami, Florida 33133
			200002452872-9 -03/10/98--01089--016 ***1058.75 ***1058.75
			REINSTATEMENT 96-98
			<i>A. Alan</i>
			3/5/98

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
Julian L. Mesa 3191 Coral Way Suite # 200 Miami, Florida 33145		Name Sergio R. Penton, PA.	
		Street Address (P.O. Box Number is Not Acceptable) 3191 Coral Way	
		Suite, Apt. #, Etc. Suite # 200	
		City Miami	State FL
		Zip Code	

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: *[Signature]* REGISTERED AGENT MUST SIGN Date: **February 27, 1998**

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)

12. 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]* 2/27/98 (305) 448-1362
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (1/98)