

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000000624

1. Corporation Name
ROCHE HOLDINGS, INC.

FILED
00 OCT 31 AM 10:26
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Principal Place of Business Mailing Address
777 BRICKELL AVE 777 BRICKELL AVE
SUITE 1010 SUITE 1010
MIAMI FL 33131 MIAMI FL 33131
If above addresses are incorrect in any way, line through incorrect information and enter correction below.



REINSTATEMENT

2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 4. Date Incorporated or Qualified To Do Business in Florida 01/04/1995
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
5. FEI Number 65-0544450 Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED

Table with 4 columns: Title(s), Name of Officers and/or Directors, Street Address of Each Officer and/or Director, City / State / Zip. Includes entries for DE LA ROCHE, HERNANDO and DELA ROCHE, PILAR.

600003468496--3
-11/17/00--01042--001
****750.00 ****750.00

8. Name and Address of Current Registered Agent: BEFELER, GEORGE, 150 W FLAGLER ST, MIAMI FL 33130
9. Name and Address of New Registered Agent: BEFELER, GEORGE, 80 S.W. 8TH STREET, SUITE 3100, MIAMI FL 33130

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: 10/27/00

11. 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] SIGNATURE REQUIRED Date: 10/26/00 Daytime Phone #: 305 982 4616 KE