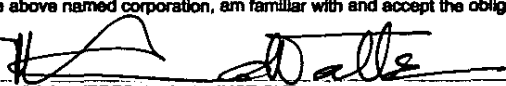
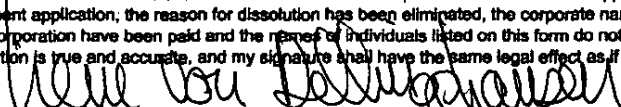


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P95000030995			
1. Corporation Name Bonita Investments, Inc. c/o Marisela Blandon Prudential Securities			
2. Principal Office Address 200 S. Biscayne Blvd. Suite, Apt. #, etc. Suite 3200 City & State Miami, Florida Zip 33131 Country USA		3. Mailing Office Address 200 S. Biscayne Blvd. Suite, Apt. #, etc. Suite 3200 City & State Miami, Florida Zip 33131 Country USA	
4. Date Incorporated or Qualified To Do Business in Florida April 20, 1995		5. FEI Number 65-0591568 6. CERTIFICATE OF STATUS DESIRED ☒ \$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent Name M. Cristina del Valle Street Address (P.O. Box Number is Not Acceptable) 801 Brickell Avenue Suite, Apt. #, Etc. Suite 1901 City Miami, Florida State FL Zip Code 33131			
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  Date <u>6/18/01</u> 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
PSD	Irene Von Dellinhausen	Av. Epitacio Pessoa A, 100 Apt. 401	Rio de Janeiro, Brazil 22410 OC
TVD	Claudia S. Singery-Ferraz	Av. Epitacio Pessoa A, 100 Apt. 401	Rio de Janeiro, Brazil 22410 OC
REINSTATEMENT <u>99-01</u>			
JUN 20 2001			
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 accurate, and my signature shall have the same legal effect as if made under oath.  SIGNATURE: Irene Von Dellinhausen, President Date <u>May 7, 2001</u> 305-374-7700 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #			

CR2001 (2/00)