

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PS/OF

FILED
Mar 13, 2003 8:00 A.M.
Secretary of State

**CORPORATION
REINSTATEMENT**

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

02 Mar 103

DOCUMENT # P96000017971

1. Corporation Name

ROFALCA TRADING, CORP.

2. Principal Office Address

14840 S.W. 104 ST.

Suite, Apt. #, etc.

SUITE 100

City & State

MIAMI, FLORIDA

Zip

33196

Country

U.S.

3. Mailing Office Address

14840 S.W. 104 ST.

Suite, Apt. #, etc.

SUITE 100

City & State

MIAMI, FLORIDA

Zip

33196

Country

U.S.

4. Date Incorporated or Qualified To Do Business in Florida

02/27/1996

5. FEI Number

65-0667680

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

ROMERO, JOSE CARLOS

Street Address (P.O. Box Number is Not Acceptable)

14840 S.W. 104 ST.

Suite, Apt. #, Etc.

SUITE 100

City

MIAMI

000010703820

01/24/03--01097--003 **15.00

000010703820

03/13/03--01042--011 **15.00

State

FL

Zip Code

33196

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

REGISTERED AGENT MUST SIGN

Date

02/18/03

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
P	ROMERO, JOSE CARLOS	14840 S.W. 104 ST.#100	MIAMI, FL 33196

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

02/18/03. (305) 525-1488

Daytime Phone #

CR2E081 (9/99)

pg 2 of 2

**ROFALCA TRADING CORP.
14840 S.W. 104 STREET, SUITE 100
MIAMI, FL 33196**

December 5, 2002

Department of State
Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, Florida 32314

**TAXPAYER: ROFALCA TRADING CORP.
DOC. NO.: P96000017971
FORM: APPLICATION FOR REINSTATEMENT
PERIOD: 2002**

Gentlemen / Mesdames:

I am writing to you regarding the penalties imposed as a result of the late filling of the 2002 Uniform Business Report. Foremost, please note that it was not my willful neglect or intent to not timely pay and file the Corporate Annual Report but simply a result of the facts stated below.

During the middle of 2001 I moved business locations. As a result of the address change, I had all of my mail forwarded by the Post Office to the new address. During this change it seems that the original copy of the Report was never forwarded to the new address. It was not until this past week when I was contacted by my bank that I realized that the annual reports were never filed. Therefore, please update your records accordingly to reflect the correct address as "14840 Southwest 104th Street, Suite 100, Miami Florida 33196".

In light of the above facts, I respectfully request the abatement of all penalties.

Please do not hesitate to contact me should you have any questions.

Sincerely,



Jose Carlos Romero, President

Enclosures