

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

FILED

98 DEC 31 AM 8:21

SECRETARIAT OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P97000040299**

1. Corporation Name

HP TWO HOLDINGS CORP.

Principal Place of Business

Mailing Address

~~6262 BIRD RD., STE. 31~~
MIAMI FL 33155

~~6262 BIRD RD., STE. 31~~
MIAMI FL 33155



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

05/06/1997

Suite, Apt. #, etc.

6255 Bird Road

Suite, Apt. #, etc.

PO Box 562438

City & State

Miami FL

City & State

Miami FL

Zip

33155

Country

USA

Zip

33256

Country

USA

5. FEI Number

65-0750220

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$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
D	PFERDMENGES, HENRI	6262 BIRD RD., STE. 31 6255 Bird Rd	MIAMI FL 33155
D	Zulueta, Ignacio G	6255 Bird Rd	Miami, FL 33155

REINSTATEMENT 98

SL 1-5-98

8. Name and Address of Current Registered Agent

ZULUETA, IGNACIO G
6255 BIRD RD.
MIAMI FL 33155

9. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 Suite, Apt. #, Etc.
 City State Zip Code
FL

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 REQUIRED

REGISTERED AGENT MUST SIGN

Date **12-3-98**

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

IGNACIO G. ZULUETA

Date **12/4/98**

(305)
233-2586
 Daytime Phone #

CR20040 (9/98)