

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Jim Smith**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 03 JAN -7 AM 8:38

DOCUMENT # P98000070877

1. Corporation Name  
TELEFONICA INTERNACIONAL USA, INC

2. Principal Office Address  
1221 BRICKELL AVE.

3. Mailing Office Address  
1221 BRICKELL AVE

Suite, Apt. #, etc.  
6TH FLOOR

Suite, Apt. #, etc.  
21ST FLOOR c/o Patricia Menendez

City & State  
MIAMI, FL

City & State  
MIAMI, FL

Zip Country  
33131 MIAMI-DADE

Zip Country  
33131 MIAMI-DADE

**REINSTATEMENT** 02-03  
12/24/02 01041 007-#750.a

4. Date Incorporated or Qualified  
To Do Business in Florida 08/13/1998

5. FEI Number 65-0862479  
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  
CORPORATION SERVICE COMPANY

Street Address (P.O. Box Number is Not Acceptable)  
1201 HAYS STREET

Suite, Apt. #, Etc.

City  
TALLAHASSEE

State Zip Code  
FL 32301-2525

300010168043  
01/16/03--01074--005 \*\*150.00

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 *Jeanine Reynolds*  
REGISTERED AGENT MUST SIGN **Jeanine Reynolds as its agent**

Date 12-31-02

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
D/S	ROS, JUAN CARLOS	1221 BRICKELL AVE, 6TH FLOOR	MIAMI, FL 33131
D	MARQUES, MAUEL COSTA	1221 BRICKELL AVE, 6TH FLOOR	MIAMI, FL 33131
D/VP	ABADIA, JORGE	1221 BRICKELL AVE, 6TH FLOOR	MIAMI, FL 33131

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: *Jorge Abadia* **JORGE ABADIA** 12/27/02 305-4163071  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (9/01)