PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
02 JAN 24 AM 12:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S73019

1. Corporation Name

Professional Blinds Systems Inc.

REINSTATEMENT 01-02

2. Principal Office Address	**3.** Mailing Office Address
6850 N.W. 74th Street	c/o Richards & Polansky, P.A. 2665 S. Bayshore Drive, Suite 703
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Miami, Florida	Miami, Florida
Zip: 33166 Country: USA	Zip: 33133 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 8/12/91

5. FEI Number: 650288801 ☐ 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: World Corporate Services, Inc.

400004344734--2
-01/30/02--01053--014
****900.00 ****900.00

Street Address (P.O. Box Number is Not Acceptable): 2665 South Bayshore Drive, Suite 703

Suite, Apt. #, Etc.:

City: Miami, State: FL Zip Code: 33133

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: Vice-President Date: 1/22/02 LS
REGISTERED AGENT MUST SIGN

CR2E081 (9/01)

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/D	Jose Manuel Belsol	6850 N.W. 74th Street	Miami, Florida 33166
VP/D	Oscar Merjech	6850 N.W. 74th Street	Miami, Florida 33166
S	Tomas Matos	6850 N.W. 74th Street	Miami, Florida 33166
T	Bernardo Mendez	6850 N.W. 74th Steret	Miami, Florida 33166
D	Jose Garcia	6850 N.W. 74th Street	Miami, Florida 33166

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: 1/22/02 305-593-9494
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Jose Manuel Belsol, Director