

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



**CORPORATION
REINSTATEMENT**

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

FILED
01 JUN 20 PM 12:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000030995

1. Corporation Name
Bonita Investments, Inc.
c/o Marisela Blandon
Prudential Securities

2. Principal Office Address **3. Mailing Office Address**
200 S. Biscayne Blvd. 200 S. Biscayne Blvd.

Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite 3200 Suite 3200

City & State City & State
Miami, Florida Miami, Florida

Zip Country Zip Country
33131 USA 33131 USA

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4. Date Incorporated or Qualified To Do Business in Florida
April 20, 1995

5. FEI Number Applied For / Not Applicable
65-0591568 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
M. Cristina del Valle

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

Suite, Apt. #, Etc.
Suite 1901

City State Zip Code
Miami, Florida FL 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 [Signature] Date 6/18/01
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 Dellinghausen	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 Dellinghausen Date May 7, 2001 Daytime Phone # 305-374-7700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2001 (01/00)