PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

						·	1	a homester the contract of	
	RPORATI	Contract Lagran	s	A DEPARTMENT OF STATE Secretary of State VISION OF CORPORATIONS			FILED 09 NOV 18 PM 2: 11		
DOCUMENT # 234407 1. Corporation Name TRANS-EURO BANKERS TRUST, CORP.						,	CLUNETARY OF STATE TALLAHASSEE, FLORIDA		
,				Office Address 7. 32ND CT. RD.				CR2E081 (12/08)	
			City & State				To Do Bus	rporated or Qualified siness in Florida 03/16/1960	
MIAMI, FLORIDA			MIAMI, FLORIDA				5. FEI Numbe	Applied For Not Applicable	
Zip 33126		Country USA	Zip 33135		Country USA		6. CERTIFICATI	TE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent									
Name JOSE LUIS LOPEZ							The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not		
Street Address (P.O. Box Number is Not Acceptable) 1000 PONCE DE LEON BLVD									
Suite, Apt. #, Etc. 3RD FLOOR							received and requesting the reinstatement		
City	L GABLES	<u> </u>		State FL 33134			fee be waived. 900162951089 11/19/0901023008 **158,75		
8. I, being	appointed the	registered agent of the abor	ve named corpora	ration, am far	miliar with ar	nd accept the ob	digations of secti	tion 607.0505 or 617.0503, F.S.	
Signature of Registered Agent REGISTERED AGENT MUST SIGN								Date 10/13/2009	
9. Names	s and Street A	diverses of Each Officer and	Vor Director (Flori	rida nonprofit	t corporation	us must list at lea	ast 3 directors)		
Titles		Name of Officers and/or Oirectors		Street Address of Each Officer and/or Director				City / State / Zip	
P/S	BARRES	BARRES-FANJUL, AGUSTINE 1930 NW 36TH AVENU				AVENUE K	P1/19	MIAMI, FLORIDA 33125	
SVP/S	HAYDEL	STIEN, YISHAI	1930 NW 36TH AVENUE			<u></u>	MIAMI, FLORIDA 33125		
VP	LOPEZ, JOSE			1930 NW 36TH AVENUE				MIAMI, FLORIDA 33125	
Τ	RUBIO,	VICTORIA	1930 NW 36TH AVENUE				MIAMI, FLORIDA 33125		
AS	TIRADO	, FRANCISCO		1930 NW 36TH AVENUE				MIAMI, FLORIDA 33125	

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 contained in Chapter 119, F.S. The information indicated on this application is true indicacurate, and my signature shall have the same legal effect as if made under oath.

1930 NW 36TH AVENUE

SIGNATURE:

ZUBIZARRETA, FLORENTINO

ΑT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/13/2009

MIAMI, FLORIDA 33125

3054411999

Date

Daytime Phone #