

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

05 AUG 26 AM 10:14

DOCUMENT # 268980

1. Corporation Name
Inter-American Engineering Corporation
5288 Alton Road
Miami Beach, FL 33140

800059177628
08/31/05--01035--006 **758.75

2. Principal Office Address
5288 Alton Road

3. Mailing Office Address
5288 Alton Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Miami Beach, FL

City & State
Miami Beach, FL

Zip Country
33140 USA

Zip Country
33140

REINSTATEMENT 02-05

4. Date Incorporated or Qualified To Do Business in Florida 4-15-63

5. FEI Number 591052275 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 LORENZO LAMADRID

Street Address (P.O. Box Number is Not Acceptable)
5288 Alton Road

Suite, Apt. #, Etc.

City miami beach

State Zip Code
FL 33140

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]*
REGISTERED AGENT MUST SIGN

Date 8/25/05

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
PD	LORENZO LAMADRID	5288 Alton Road	Miami Beach FL 33140
SD	CARMEN LAMADRID	5288 Alton Road	Miami Beach FL 33140

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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/25/05 305-864-2041
Date Daytime Phone #

2012

Lorenzo Lamadrid
5288 Alton Road
Miami Beach, FL 33140

Secretary of State
Division of Corporations

Gentlemen:

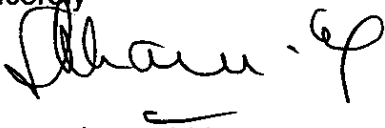
Enclosed please find my reinstatement for my corporation. Please be advised that I never received my annual reports to file. I have always kept my corporation active and up to date.

I ask you to please waive the penalty fee.

Enclosed is my check in the amount of \$758.75 to cover the annual fee from 2002-2005.

Thank you for your attention and consideration in this matter.

Sincerely



Lorenzo Lamadrid

RECEIVED
05 AUG 26 AM 9:48
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA