

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 DEC 17 PM 12:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 562797

1 Corporation Name

PAVILION AUTO LEASING & RENTAL, INC.

Principal Place of Business

Mailing Address

None at this time

REINSTATEMENT 84-96

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2 New Principal Office Address, If Applicable

3 New Mailing Address, If Applicable

c/o CT Corporation System

4 Date Incorporated or Qualified
To Do Business in Florida
3/23/78

Suite, Apt #, etc

Suite, Apt #, etc

1200 S. Pine Island Rd

5 FEI Number

Applied For

City & State

City & State

Plantation, Florida 33324

59-1800503

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

7 Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/D	Felix Gateno	Carrera 56 #79-127 Pizo 9 Barranquilla, Colombia	
S/D	Rina Abadi	Carrera 56 #79-127 Pizo 9 Barranquilla, Colombia	
			700002032407--8 -12/18/96--01041--021 ***1665.00 ***1665.00
			JB12-17-96

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Guillermo Sostchin, Esq.
291 S.W. 27th Avenue, 2nd FL
Miami, Florida 33135

Name

C T Corporation System

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

1200 S. Pine Island Rd

Suite, Apt #, Etc.

City

Plantation

State

FL

Zip Code

33324

10 I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

Tanya M. Villar

TANYA M. VILLAR

SPECIAL ASSISTANT SECRETARY

Date

12-13-96

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No

(See other side for information on intangible tax.)

12 I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

Felix Gateno Felix Gateno

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12/25/96

CR2040 (12/95)