

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR 94-97
REINSTATEMENT



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

APPROVED
AND
FILED

97 OCT 16 PM 1:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 626324

1. Corporation Name

INVERSIONES EMMER, INC.

Principal Place of Business

Mailing Address

EMILIO NARCISO
1800 COLLINS AVENUE
APT. 4 H
MIAMI, FL. 33139

If above address is not correct in any way, enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified
To Do Business in Florida

6/18/79

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

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	EMILIO NARCISO	1800 COLLINS AVE. APT. 4 H	MIAMI, FL. 33139
D	JORGE NARCISO SANCHEZ	Same as above	800002323558--5 -10/17/97--01115--006 ***1253.75 ***1253.75
D	MERCEDES NARCISO SANCHEZ	Same as above	
D	ELIZABETH NARCISO SANCHEZ	Same as above	
VP	MERCEDES SANCHEZ DE NARCISO	Same as above	

REINSTATEMENT 94-97

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

EMILIO NARCISO
1800 COLLINS AVENUE APT. 4H
MIAMI, FLORIDA 33139

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Emilio Narciso L.

REGISTERED AGENT MUST SIGN

Date 10/15/97

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 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: *Emilio Narciso L.* EMILIO NARCISO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/15/97
Date

(305) 534-5594
Daytime Phone #

CR2E040 (12/96)

15 de Octubre de 1997

Florida Department of State
Division of Corporations


RE: INVERSIONES EMMER, INC.

Dear Sirs:

All the correspondence, invoices, notifications, etc., regarding above referenced corporation, please send to the following address:

Eduardo Ruiz de Pellón
Vice President
Banco Santander International
1401 Brickell Avenue
Miami, Florida 33131

Thank you for your kind cooperation.


EMILIO NARCISO