

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 MAR 15 PM 12:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F00000001547

1. Corporation Name

ERES Limited, Inc.

2. Principal Office Address

9 West 57th Street

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

45th Floor

City & State

New York, New York

City & State

Zip

10019

Country

New York

Zip

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

3/21/2000

5. FEI Number

13-4108862

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 01-04 WOP

7. Name and Address of Current Registered Agent

Name

C.T. Corporation System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State
FL

Zip Code

33324

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 AgentJonathan R. Giddings
Assistant Secretary

REGISTERED AGENT MUST SIGN

Date 10/15/03

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
Director	Irene Harrington	9 W 57th St. 45th Floor	New York, NY 10019
Director	Michael Rena	9 W 57th St. 45th Floor	New York, NY 10019
Director	Francisco Saumoy	9 W 57th St. 45th Floor	New York, NY 10019

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:

Francisco Saumoy October 09, 2003 (212) 688-5055

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

ERES

202

March 9, 2004

State of Florida
Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

Re: Document Number F00000001547

Dear Sir or Madame,

We would like to apply for reinstatement of Eres Limited's authority to do business in Florida. The Florida Department of State has on record that the annual registration renewals have been returned to the Department of State as undeliverable; we therefore request that the penalty for late filing be waived.

Thank you for your assistance.

Sincerely yours,
Eres Limited

Sandi Ledvig
Sandi Ledvigs
Corporate Secretary