PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

ACCEPTED AND FILED
03 APR 22 AM 7:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F01000001110

1. Corporation Name

ENVIRONMENTAL TRANSFORMATION PROJECTS CORP.

700016681627
01/22/03--01072--026 **900.00

REINSTATEMENT 02-03

2. Principal Office Address		**3.** Mailing Office Address	
AVE 6 A # 38 N - 60		1571 NW 139 AVE	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
APT 1112			
City & State		City & State	
CALI, VALLE DEL CAUCA		PEMBROKE PINES, FL	
Zip	Country	Zip	Country
	COLOMBIA	33028	USA

4. Date Incorporated or Qualified To Do Business in Florida: 02/23/2001

5. FEI Number: — — — Applied For [X] 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: DUQUE, ORLANDO

Street Address (P.O. Box Number is Not Acceptable): 1571 NW 139 AVE

Suite, Apt. #, Etc.:

City: PEMBROKE PINES | State: FL | Zip Code: 33028

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: _____ (REGISTERED AGENT MUST SIGN) Date: 4/17/2003

CR2E081 (10/02)

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
CP	DUQUE, ORLANDO	1571 NW 139 AVE	PEMBROKE PINES, FL, 33028
W	DUQUE, RODRIGO LEON	1571 NW 139 AVE	PEMBROKE PINES, FL, 33028
DT	DUQUE, FELIPE ALEJANDRO	1571 NW 139 AVE	PEMBROKE PINES, FL, 33028
S	ACOSTA, ALBA NIDIAN	1571 NW 139 AVE	PEMBROKE PINES, FL, 33028

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: _____ ORLANDO DUQUE 4/17/2003 (954) 394 2656

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #