PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMEN
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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F94000003873

1. Corporation Name

REUTERS LATIN AMERICA MEDIA SERVICES INC.

Principal Place of Business

Mailing Address

1700 BROADWAY 40TH FLOOR

1700 BROADWAY 40TH FLOOR

FILED

98 DEC 28 PH 2: 56

SECRETARY OF STATE TALLAHASSEE, FLORIDA

NEW TORK NT 10019		NEW YORK N	NEW YORK NY 10019			4 FORMING FOLD AND MARKE BEINE BENTH WANTE BEING ORIGIN THREE SENT AND A FACTOR FOR THE		
If above a	ıddresses are	incorrect in any way, line	through incorrect in	nformation a	and enter correction below.	REINS.	TATEMEN'	T 0/2
New Principal Office Address, If Applicable							orated or Qualified ness in Florida)7/25/1994
Suite, Apt. #, etc. City & State		Suite, Apt. #,	Suite, Apt. #, etc.				11/20/1004	
		ļ				5. FEI Number		
		City & State	City & State		13-3756993 N		Not Applicable	
Zip		Country	Zip		Country	6. CERTIFICAT	E OF STATUS DESIRED	8.75 Additional Fee require for a Certificate of Status
7. Names	and Street Ad	dresses of Each Officer a	ınd/or Director (Flo	rida nonpro	fit corporations must list at le	ast 3 directors)	- 10.114	
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)		r	City / State / Zip	
DP	P—— CARVALHO, TACIO			1700 BROADWAY		NEW YORK NY-10019		
					1.1 18480		1	

1	2	3 (Do NOT Use Post Office Box Numbers)	4			
DP	CARVALHO, TACIO	1700 BROADWAY	NEW YORK NY-10019			
c ^b D	GLOCER, THOMAS	1700 BROADWAY 40 E Sand ST	NEW YORK NY 10023			
SVP	PIHA, ISAAC	1700 BROADWAY	NEW YORK NY 10019			
ZA	Maria Diaz	1700 Broadway	New York, NY 10019			
0	David Turner	40 Esand St	New YORK NY 10019			
Asst. Sec.	Gerard Martorano	1700 Broadway, 40th Floor	New York, NY 10019			
	8. Name and Address of Current Registered Age	nt 9. Name and	9. Name and Address of New Registered Agent			

8. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.

Name

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

Suite, Apt. #, Etc.

City

900002734619

01708733<u>state</u>02566660004

*****751. File

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

SUITE 105

1201 HAYS STREET

TALLAHASSEE FL 32301

Date 12-24-98

This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes I

(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: