PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
06 JAN -3 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
400062298314
01/12/06--01003--013 **150.00

400062298314
12/21/05--01005--013 **1050.00

CR2E081 (8/05) 63-05

DOCUMENT # F96000002230

1. Corporation Name

Keymar Investment Corporation, Inc.

2. Principal Office Address	3. Mailing Office Address
2815 NW 13th Avenue	2815 NW 13th Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Miami, Florida	City & State: Miami, Florida
Zip: 33142 Country: USA	Zip: 33142 Country: USA

4. Date Incorporated or Qualified To Do Business In Florida: 5/3/96

5. FEI Number: 980046454 ☐ Applied For ☐ 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: MP Property Management, Inc c/o M. Palacios

Street Address (P.O. Box Number is Not Acceptable): 3575 West 72 St.

Suite, Apt. #, Etc.:

City: Hialeah State: FL Zip Code: 33018

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 _____ Date 12/29/2005

REGISTERED AGENT MUST SIGN

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
PD	Ramon Vidri Miro	1510 Crandon Blvd., Dept.830	Key Biscayne, FL 33149
VTD	Ramon Vidri, Jr.	1510 Crandon Blvd., Dept. 830	Key Biscayne, FL 33149
SD	Patricia Vidri	1510 Crandon Blvd., Dept. 830,	Key Biscayne, FL 33149
		B 1/5/06	
		REINSTATEMENT 03-06	

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: X Ramon Vidri

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