

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT****FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS**

FILED

04 MAY -7 AM 11:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**DOCUMENT # F96000005598****1. Corporation Name**

CARIBBEAN AND LATIN AMERICAN MARKETING SERVICES, INC.

2. Principal Office Address

1101 Brickell Ave.

3. Mailing Office Address

1101 Brickell Ave.

Suite, Apt. #, etc.

Suite 802S

Suite, Apt. #, etc.

Suite 802S

City & State

Miami, FL

City & State

Miami, FL

Zip

33131-3131

Country

Miami-Dade

Zip

33131-3131

Country

33131-3131

4. Date Incorporated or Qualified

To Do Business in Florida 10/29/1996

5. FEI Number

13-3914499

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**

Joseph Buczyner, CPA

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

1 SE 3rd Ave.

Suite, Apt. #, Etc.

Suite 2150

City

Miami

State

FL

Zip Code

33131

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

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	Pierre Milet	C/O FBG 1 SE 3rd Ave. #2150	Miami, FL 33131
S	Robert P Oppenheim ESQ	1101 Brickell Ave Suite 802S	Miami, FL 33131-3131
AS	Robert W Hamilton ESQ	C/O FBG 1 SE 3rd Ave. #2150	Miami, FL 33131

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)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date


Daytime Phone #



Freeman, Buczyner & Gero
Certified Public Accountants and Consultants
A Partnership of Professional Associations

MEMBER

American Institute of Certified Public Accountants
Florida Institute of Certified Public Accountants

 MGI Business Solutions Worldwide

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SunTrust International Center
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Suite 2150
Miami, FL 33131
Dade: (305) 375-0766
Broward: (954) 359-8345
Fax: (305) 375-0757
www.fbgcpamiami.com

April 29, 2004

Florida Department of State
Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

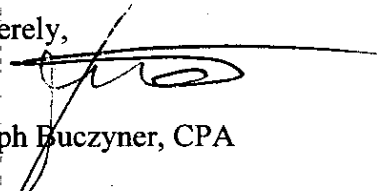
RE: Caribbean and Latin American Marketing Services, Inc.
Document Number: F96000005598
FEIN: 13-3914499
2003 & 2004 Corporation Reinstatement

Dear Sir or Madam:

We are the accountants for the above referenced Corporation. Due to changes in mailing address, the Corporation did not receive the 2003 and 2004 renewal notice. Therefore, the annual report for 2003 was not filed.

The corporation was unaware of this clerical oversight. They maintain good reporting records with the Florida Department of State. It is committed to filing the annual report timely and to continue to pay its liabilities. Furthermore, since this was an honest and clerical oversight, we respectfully request an abatement of the reinstatement fee and that your office accept the \$300.00 check attached (annual report filing fee of 2003 and 2004). If we can be of further assistance, please do not hesitate to contact our office.

Sincerely,


Joseph Buczyner, CPA

Letter # 4627