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PLEASE READ ALL INSTRUCTIONS BEFORE COM						NG THIS FORM.
FOR			A DEPARTMENT OF STATE Sandra B. Mortham Secretary of State VISION OF CORPORATIONS			
DOCUMENT # F97000005431					98 NOV -4 PM 2: 26	
1. Corporation Name Brightstar International Corp. 1					SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business         Mailing Address           9725 NW 52 Street         9275 NW 52 Street           #402         #402           Miami, FL 33178         Miami, FL 33178					60	00026847055
If above addresses are incorrect in any way, line through incorrect information and enter correction below.  2 New Principal Office Address, If Applicable  3 New Mailing Office Address, If Applicable					-11/10/9801076011 ****750.00 ****750.00	
			NW 82 Avenue		4. Date Incorpo To Do Busine	rated or Qualified ess in Florida 10/15/97
City & State Miami, FL 33122 City & State Miami,			-		5. FEI Number         Applied For           33-0774267         Not Applicable	
Zip	Country	Zip 33122	Country		6. CERTIFICATE	OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
33122 USA 33122 USA 1012 USA 1						
Title(s)	Name of Officers and/or Directors 2		Qff	et Address of Each cer and/or Director e Post Office Box N		City / State / Zip
PCTD	CTD Raul M. Claure			1 Ave de Magnolia		Rancho Palos Verdes, CA
VD	David H. Peterson 18 Ave o			Camilia		Rancho Palos Verdes, CA
			REINST	TATEMI	ENT	76 75 11/6
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8. Name and Address of Current Registered Agent Name					9. Name and A	ddress of New Registered Agent
Donald Cahill 9725 NW 52 Street, #402 Miami, FL 33178				Troy Rillo  Street Address (P.O. Box Number is Not Acceptable) c/o Kirkpatrick & Lockhart LLP  Suite, Apt. #, Etc. 201 S. Biscayne Blvd., 20th Floor		
Mi ami 10 I, being appointed the registered agent of the store paried corporation, am familiar with and accept the obt					olientions of Socie	FL 33131
Signature of Registered		COS	ENT MUST SIGN	in and accept the or	ongations of Section	Date 11/3/98
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No D						
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 507 or 617, F.S. I further certify that when fining 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 5ath.						
SIGNATURE: RAUL M. CLAURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #						