PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS			O3 DEC 15 AH 8: 31 SECRETARY OF STATE			
DOCUMENT # F98000003574 1. Corporation Name							SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Fou	ndry En	gineers	s, Inc.	•						
,					Office Address Vaterside Circle		127	23/03010	019011	**1200.00
Suite, Apt. #, etc. Suite, Apt. #					etc.		4. Date Incorporated or Qualified To Do Business in Florida June 23, 1998			
City & State Weston, FL				City & State Weston, FL			5. FEI Numb 22-16			
33327	-2021	Country		Zip 33327-202		JSA	6.	E OF STATUS DESIF		dditional Fee required Certificate of Status
	Name Walter Nachtigall Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City Weston 7. Name and Address of Current Registered Agent 1024 Waterside Circle 12/23/03-01019-011 **1200.00									
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the observation of Registered Agent REGISTEREP AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least							11/20/03			
Titles	Name of Officers and/or Directors				Street Address of Each Officer and/or Director			City / State / Zip		
PD	Norberto C. Da Silva				R. Senador Felipe Schmidt			228, Joinville 89201 Brazil		
VD	Walter Nachtigall				1024 Waterside Circle			Weston, FL 33327-2021		
										149 5/3
owed b	nstatement ap by the corpora	iplication, tr tion have be	e reason for disso eep paid and the n	lution has been elir ames of individu als	minated, the listed on the the same le	secute this application as e corporate name satisfies his form do not qualify for gal effect as if made unde	s the requirement: an exemption upo	s of section 607 04:	01 or 617 0401 I	S that all food
SIGNAT		GNATURE A	NO TYPED OR PRIM	TED NAME OF SIG		er Nachtigaller or Director	1	1/20/03 Date	(954) 217 Daytime P	