

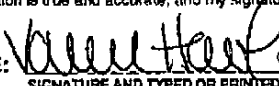
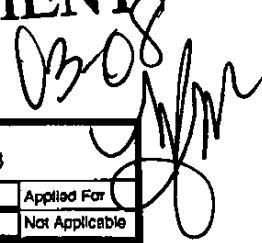


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

08 AUG -5 PM 2:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT 		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # G43297 1. Corporation Name JORDAN & PRIETO, P.A.			
2. Principal Office Address - No P.O. Box # 4302 W. BROWARD BLVD Suite, Apt. #, etc. SUITE 200 City & State PLANTATION, FL Zip Country 33317 USA		3. Mailing Office Address 11380 Prosperity Farms Rd. Suite, Apt. #, etc. # 221 E City & State Palm Beach Gardens, FL Zip Country 33410 USA	
		4. Date Incorporated or Qualified To Do Business in Florida 06/13/1933	
		5. FEI Number 592334290	
		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 for additional fee required Certificate of Status	
7. Name and Address of Current Registered Agent Name Corporate Creations Network Inc. Street Address (P.O. Box Number is Not Acceptable) 11380 Prosperity Farms Road Suite, Apt. #, Etc. #221E City State Zip Code Palm Beach Gardens FL 33410			
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  S. Simons, Special Assistant Secretary Date 8/5/08 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
PDST	OCTAVIO PRIETO E.M.D.	4302 W. BROWARD BLVD, STE 200	PLANTATION FL 3317
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 contained in Chapter 119, 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: 		O. PRIETO, By V.Hawk as atty-in-fact 8/5/08 561-694-807	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Day Month Phone #	

REINSTATEMENT
 CR2E081 (12/07)


Division of Corporations

Florida Department of State
Division of Corporations
Public Access System

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To: Division of Corporations
Fax Number : (850)617-6384

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

CORPORATION REINSTATEMENT

JORDAN & PRIETO, P.A.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$1,500.00

\$900 - reinstatement fee waiver - \$600

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