

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

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DOCUMENT # K 10852

**1. Corporation Name**

ONIT USA, INC.

**2. Principal Office Address**

C/O: 7400 NW 7TH STREET

**3. Mailing Office Address**

C/O: 7400 NW 7TH STREET

Suite, Apt. #, etc.

SUITE 109

Suite, Apt. #, etc.

SUITE 109

City & State

MIAMI, FLORIDA

City & State

MIAMI, FLORIDA

Zip

33126

Country

USA

Zip

33126

Country

USA

REINSTATEMENT

CR2E081 (12/05)

2000-2006

**4. Date Incorporated or Qualified  
To Do Business in Florida**

01/06/1988

**5. FEI Number**

65-0050474

Applied For

Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☒

\$3.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

ROSADO, CARLOS

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

7400 N.W. 7TH STREET

Suite, Apt. #, Etc.

SUITE 109

City

MIAMI

State  
FL

Zip Code  
33126

**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 11-21-2006

**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	ABRAHAM, ASIS	801 BAYSHORE DR. #1124	MIAMI, FLORIDA 33131
VD	ABRAHAM, RAUL	801 S BAYSHORE DR. #1124	MIAMI, FLORIDA 33131
VD	ABRAHAM, CARLOS	801 S BAYSHORE DR. #1124	MIAMI, FLORIDA 33131
SD	ABRAHAM, SERGIO	801 S BAYSHORE DR. #1124	MIAMI, FLORIDA 33131
AS	ROSADO, CARLOS	7400 NW 7TH STREET, SUITE 109	MIAMI, FLORIDA 33126
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**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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CARLOS ROSADO

11-21-2006 (305) 267-2120

Date

Daytime Phone #

B. Mitchell NOV 27 2006