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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # L54040

1. Corporation Name

Aldema Miami Beach Investment Corporation

2. Principal Office Address

200 South Biscayne Blvd.

Suite, Apt. #, etc. 6th Floor

City & State Miami, FL

Zip 33131

Country USA

3. Mailing Office Address

200 South Biscayne Blvd.

Suite, Apt. #, etc. 6th Floor

City & State Miami, FL

Zip 33131

Country USA

4. Date Incorporated or Qualified To Do Business in Florida

03/01/1990

5. FEI Number

65-0176009

Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED

7. Name and Address of Current Registered Agent

Name Francisco J. Martin, CPA

Street Address (P.O. Box Number is Not Acceptable) 200 South Biscayne Boulevard

Suite, Apt. #, Etc. 6th Floor

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 807.0505 or 817.0503, F.S.

Signature of Registered Agent [Signature]

Date January 6, 2004

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D, P	Alberto Deller	Casilla 2036	Quito, Ecuador
D, T	Frida Deller	Casilla 2036	Quito, Ecuador
D, VP	Michel Deller	Casilla 2036	Quito, Ecuador
D, S	Helen Deller	Casilla 2036	Quito, Ecuador

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 807 or 817, 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 807.0401 or 817.0401, 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)(c), 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] Michel Deller

01/06/04 011-593-22-464-1

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Daytime Phone #

REINSTATEMENT 03-04

Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

ALDEMA MIAMI BEACH INVESTMENT CORPORATION

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