PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 JUN -5 PM 4:43

REINSTATEMENT 02-03

000015327530
04/07/03--01002--026 **8.75

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04/07/03--01002--025 **236.25

DOCUMENT # N00000001957

1. Corporation Name
LATIN AMERICAN & HUMORIOS FUNDATION CORP

2. Principal Office Address	**3.** Mailing Office Address
13671 S.W 81 STREET	S/M
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	13671 S.W. 81 STREET
City & State	City & State
MIAMI FLORIDA	MIAMI FL
Zip / Country	Zip / Country
33183 / FLORIDA	33183 / FL

4. Date Incorporated or Qualified To Do Business in Florida: 03/24/2000

5. FEI Number: Applied For [ ] Not Applicable [X]

6. CERTIFICATE OF STATUS DESIRED [X] — $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: WILLY PECHE

Street Address (P.O. Box Number is Not Acceptable): 13671 S.W 81 STREET

000015327530
06/05/03--01033--013 **61.25

Suite, Apt. #, Etc.:

City: MIAMI FLORIDA | State: FL | Zip Code: 33183

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: Willy Peche — Date: 3-31-03

REGISTERED AGENT MUST SIGN

CR2E081 (9/01)

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
P,D	WILLY PECHE ( )	13671 S.W 81 STEERT	MIAMI FL 33183
D	BEJAMIN RAUSSEO	21530 S.W. 94 AVE	MIAMI FL 33189
D	YANCYN CABRERA ( )	13671 S.W. 81 STREET	MIAMI FL 33183
T,S	LUIS PECHE	13671 S.W. 81 STREET	MIAMI FL 33183
T,S	FRANCISCO GANDICA	6467 S.W 39 TERACE MIAMI FL 33155	MIAMI FL 33155

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 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 oath.

SIGNATURE: Willy Peche — 3-31-03 — (305) 385.7371

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #