PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 AUG 20 AM 10:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000002546

1. Corporation Name
Unidos Por Un Manana Colombia Inc.

800022631378
08/28/03--01025--004 **61.25

5/29/02 90739 002 61.25

2. Principal Office Address	3. Mailing Office Address
9390 NW 24 Place	2210 SW 67 Terrace
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	House
City & State	City & State
Pembroke Pines, Fl	Miramar, Fl
Zip / Country	Zip / Country
33024	33023

4. Date Incorporated or Qualified To Do Business in Florida: 65-0508552

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

6. CERTIFICATE OF STATUS DESIRED [ ] $30.00 additional fee required on a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Castaneda, Fabio

Street Address (P.O. Box Number is Not Acceptable): 2210 SW 67 Terrace

Suite, Apt. #, Etc.:

City: Miramar | State: FL | Zip Code: 33023

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: Fabio Castaneda Date: 8-13-03

REGISTERED AGENT MUST SIGN

CR2E081 (10/02)

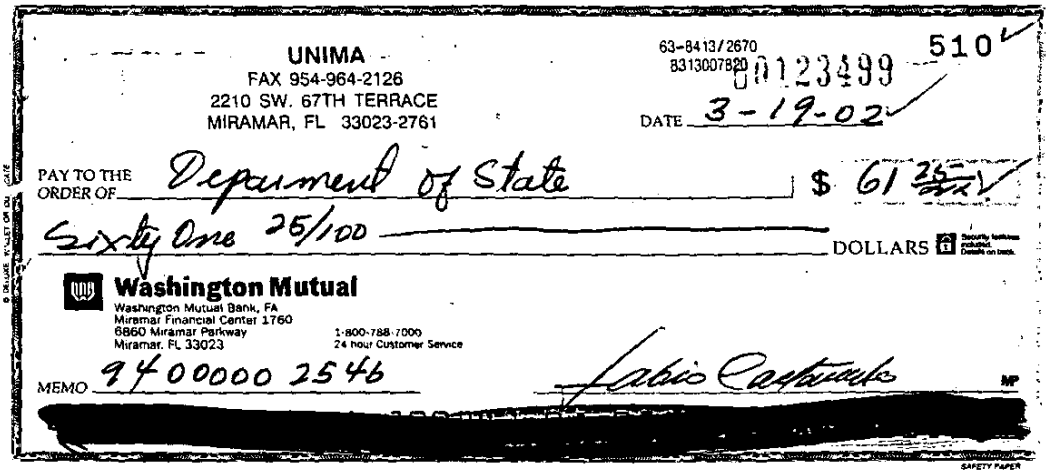
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Bermail, Nora	9390 NW 24 Place	Pembroke Pines, Fl 33024
VD	Castaneda, Fabio	2210 SW 67 Terrace	Miramar, Fl 33023
SD	Castaneda, Cecilia	2210 Sw 67 Terrace	Miramar, Fl 33023
TD	Alvarez, Elisa	10325 NW 8th Street	Pembroke Pines, FL 33026

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.

FABIO CASTANEDA VD
Fabio Castaneda 8-13-03 C611 954.6820314

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



UNIMA
FAX 954-964-2126
2210 SW. 67TH TERRACE
MIRAMAR, FL 33023-2761

63-8413/2670
8313007820 00123499 510

DATE 3-19-02

PAY TO THE ORDER OF Department of State $ 61 25/100

Sixty One 25/100 DOLLARS

Washington Mutual
Washington Mutual Bank, FA
Miramar Financial Center 1760
6860 Miramar Parkway
Miramar, FL 33023
1-800-788-7000
24 hour Customer Service

MEMO 9400000 2546

Fabio Castaneda

SAFETY PAPER

DEPARTMENT OF STATE
FOR DEPOSIT ONLY
ACCT.# 1000068798

MAY 29 2002

DO NOT WRITE, STAMP OR SIGN BELOW THIS LINE

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MAY 31 02

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• Small type in signature line appears as dotted line when photocopied.
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• Absence of "Original Document"

FEDERAL RESERVE BOARD OF GOVERNORS REG. CC

UNIMA
2210 SW 67th Terrace
Miramar, Fl 33023

August 13, 2003

Florida Department Of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl 32302-1500

Reference Number: N94000002546

To whom it may concern:

Please find the attached paperwork regarding our organization. Two weeks after receiving a request letter from your agency, we corrected and resubmitted the from to your office. As of today's date we have not received any further information and we are attaching a new check for the annual report for the 2003 requirement.

Thank you in advance for your attention in this matter.

Sincerely,

Fabio Castaneda 8-13-03

Fabio Castaneda
UNIMA