2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT :

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

FILED DOCUMENT # N96000003984 06 NOV -6 PM 3: 03 PARAISO CONDOMINIUM ASSOCIATION, INC. TALL AHASSEE, FLORIDA Mailing Address Principal Place of Business 1000 W 28 ST.APT. 5 1000 W 28 ST.APT. 5 ATTN: LORNA SANCHEZ ATTN: LORNA SANCHEZ 03-01-06 90023 033 HIALEAH, FL 33010 HIALEAH, FL 33010 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E099 (11/05) OL 10302006 REIN-NP City & State City & State 4. FEI Number Applied For-- -65-0508664 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MONTESINO, JOSE Street Address (P.O. Box Number is Not Acceptable) 1000 W 28 ST **APT 11** HIALEAH, FL 33010 City Zip Code 8. The above named exitive submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of p oma SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$236.25 Make check payable to After January 1, 2007, Fee will be \$297.50 Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Delete ☐ Change ☐ Addition TITLE TITLE SANCHEZ, LORNA NAME NAME 1000 W. 28 ST #5 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33010 CITY-ST-ZIP D Defete Change ☐ Addition TITLE TITLE ZEPEDA, AIDA NAME NAME STREET ADDRESS 1000 W. 28 ST #2 STREET ADDRESS HIALEAH, FL 33010 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition MANTESINO, JOSE NAME NAME STREET ADDRESS 1000 W. 28 STY #11 STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33010 CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITL F ☐ Chance NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the rece changed, or on an attachmen Daytime Phone it

NG OFFICER OR DIRECTOR

Paraíso Condominium asociación, inc. 1000 W 28th Street Hialeah, Fl. 33010

November 2, 2006

Florida Department of State Division of Corporations. Reinstatement-Department.

Reference Number N96000003984

This letter is in regard to the reinstament of paraiso Condominiun association corp.

Enclosed please find the signed document needed to reinstate this corporation, as I explained in a recent telephone conversation with one of your agents in your reinstatement department, after the original document was mailed with our check, we never received notification that the document was incomplete regarding missing signatures, etc. therefore making it impossible for our organization to return it signed, we found out a few weeks ago that the corporation was inactive, when our insurance policy had to be renewed. We ask that do to the above mentioned situation that-you-please make an exception and have the corporation reinstated, with no further charges.

Thank you,

Lorna Sanchez