

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



APPLICATION FOR REINSTATEMENT

**FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS**

DOCUMENT # N97000005776 (6)

1 Corporation Name

EARTH FIRST, INC.

FILED

01 APR 19 AM 9:53

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

Mailing Address: 820 Meridan Ave. Suite 208, Miami Beach, FL 33139
Principal Place of Business: 820 Meridan Ave. Suite 208, Miami Beach, FL 33139

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2. New Mailing Address, If Applicable		3. New Principal Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 10.13.97	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 65-0786524	
City & State		City & State		Applied For <input type="checkbox"/>	
Zip		Zip		Not Applicable <input type="checkbox"/>	
Country		Country		6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P/T/S/D	Sara Brandvold	820 Meridian Avenue, Suite 208	Miami Beach, FL 33139
D	Oswaldo J. Rodriguez	820 Meridian Avenue, Suite 103	Miami Beach, FL 33139
D	Luis Fernando Cardenas	820 Meridian Ave, ste 103	Miami Beach FL 33139
			800004195348-2 05/11/01 01028-011 ****428.75 ****428.75
REINSTATEMENT 9801			

8. Name and Address of Current Registered Agent

Sara Brandvold
820 Meridian Avenue
Suite 208
Miami Beach, FL 33139

9. Name and Address of New Registered Agent

Name		
Street Address (P.O. Box Number is Not Acceptable)		
Suite, Apt. #, Etc.		
City	State FL	Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: *Sara Brandvold*
Sara Brandvold, P/T/S/D REGISTERED AGENT MUST SIGN

Date: **04-18-01**

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box (See other side for additional information.)

12. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No (See other side for information on intangible tax.)

13. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: *Sara Brandvold* 4-18-01 305.583.4259

Sara Brandvold P/T/S/D REGISTERED AGENT OR DIRECTOR Date Daytime Phone #

CR2E040 (6/94)