PLEASE READ A	LL INSTRUCTIONS	BEFORE	COMPLETING THIS FORM.	
	FLORIDADEPARTMEN	NT OF STATE n State	FILED	
DOCUMENT # P0000004234			02 NOV 13 PH 5: 33	
1. Corporation Name			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
M.A.V. INVESTMENTS, CORP.			TALLAHASSEE, FLORIDA	
Principal Place of Business Mailing Address		<u>.</u>		
-2222 · NW -4 - TER				
If above addresses are incorrect in any way, line through incorrect information and enter correction below.		700008968637 11/13/0201063009 ***183.75		
2. New Principal Office Address, If Applicable   3. New Mailing Office Address, If Applicable     4/1/3   5. W. 154     Suite, Apt. #, etc.   Suite, Apt. #, etc.			4. Date Incorporated or Qualified To Do Business in Florida 01/10/2000	
City & State	City & State	/	5. FEI Number Applied For	
Miami, Florida Zip 33185 Country	Miami, Florid	ý	6. 38.75 Additional Fee required	
33785 U.S.A.   7. Names and Street Addresses of Each Officer and/or I	the second s	S.A.	CERTIFICATE OF STATUS DESIRED Of for a Certificate of Status	
Title(s) Name of Officers Street Address		eet Address of Each licer and/or Director		
-D VEGA, MARCOS A			MIAMI FL 33125	
P/D Vega, Marcos A. 4113 S.W		154 Pat	h Miami FL 33185	
			9. Name and Address of New Registered Agent	
		Vega,	Vega, Marcos A.	
2222 · NW=4=TER=		Street Address (P.O. Box Number is Not Acceptable) 4113 Street - 154 Path Suite, Apt. #, Etc.		
MIAMI FL- 33125- Suite, Apt. #, Etc.			5	
City Miami			State Zip Code FL 33185	
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. or 617.0505, F.S.				
Signature of Registered Agent Agent REGISTERED AGENT MUST SIGN Date 10/31/02				
11. 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OR DIRECTOR				

## M.A.V. Investments

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4113 S.W. 154<sup>th</sup> Path Miami, Florida 33185

November 6, 2002

Division of Corporations Annual Report Tallahassee, Florida

Ref. M.A.V. Investments, Corp. FEI Number 65-0973464 Document #P00000004234

Dear Sir or Madam:

This letter is to inform you that M.A.V. Investments did not receive the UBR for the year 2002, most likely due to the company's address change. Please note the new address on the reinstatement form, as we are still having problems with mail forwarding.

Sincerely,

Marcos A. Vega President