PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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	RPORĂTION STATEMENT	K t) e. Seeretar	TMENT OF TATE	SE DIVIS	FILED GRETARY OF STATE TON OF CORPORATE		
1. Corpora	JMENT # P000000090	•			MAR 29 PM 4: 0	10	
	· · · · · · · · · · · · · · · · · · ·						
2. Principa 7925 Suite, Apt. #		3. Mailing Office Address 7925 N.W. Suite, Apt. #, etc.	5 N.W. 12TH STREET		8000052815281 -04/16/0201027010 ****150.00 ****150.00		
SUITE City & State	318	SUITE 318 City & State	TE 318 4. Da		ncorporated or Qualified Business in Florida 01/27/00		
MIAMI , FLORIDA Zip Country		MIAMI, FL	ORIDA Country	5. FEI Number 65-0981633		Applied For Not Applicable	
33126	USA	33126	USA ddress of Current Regist	MANAGEMENT THE TAXABLE PROPERTY.	OF STATUS DESIRED St. /5	Additional Fee require a Certificale of Status	
	ANA ENRIQUEZ Street Address (P.O. Box Number is Not Acceptable) 7925 N.W. 12TH STREET Suite, Apt. #, Etc. SUITE 318 City MIAMI				B000052815281 -04/16/0201027011 ****150.00 *****150.00 State Zip Code FL 33126		
8. I, being a Signature of Registered A		ve named corporation, am fa WUZ () EGISTERED AGENT MUST		obligations of section	607.0505 or 617.0503, F.S. Date03/22/02		
9. Names a	and Street Addresses of Each Officer and	l/or Director (Florida nonprof	it corporations must list at	least 3 directors)		10.0	
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip		
PD	CARLOS ENRIQUEZ	7925	7925 N.W. 12TH STREET #318		MIAMI, FLORIDA	33126	
	-						
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10. If 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 fillingthis 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 #19.07(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 SIGNING OFFICER OR DIRECTOR

03/22/02

Daytime Phone #

PANADERIA 20 DE JULIO, INC. 7925 N.W. 12th Street #318 Miami, Florida 33126

March 22, 2002

Florida Department of State Corporation Reinstatement

To Whom It May Concern:

I am sending the reinstatement for my corporation "Panaderia 20 De Julio, Inc." Document number P0000009038, with a check for \$300.00. During the year 2001 the annual report was sent back to your office, by the post office. I'm attaching a check for \$300.00 for last year annual report (2001) and this year report (2002). We ask that you please waive the penalty because we never received any notices regarding the annual report. If you need further assistance regarding this matter, please do not hesitate to contact us at your convenience.

Very Truly Yours,

Ana Enriquez