PLEASE READ	ALL INST	RUCTIONS	BEFORE C	OMPLET	ING THIS FORM.		
APPLICATIONS REINSTATEMENT	FLORIDA	A DEPARTMENT Katherine Has Secretary of Secr	NT OF STATE Irris State		FILED SEURETARY OF STA VISION OF CORPORA	il Tinn≎	
DOCUMENT # P00000037099 1. Corporation Name CATUR INVESTMENTS CORP.				01 DEC 14 PM 1:56			
Principal Place of Business	Mailing Addre	58					
,	8370 W Fla Suite 234 Miami, FL	agler St. 33144-204	o				
If above addresses are incorrect in any way, line the 2. New Principal Office Address, If Applicable Suite, Apt. #, etc.	ng Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 4/12/00				
Suite, Apt. #, etc. Suite, A City & State City & S				1 65-1005547		Applied For Not Applicable	
Zip Country	Zip	Country	,	6. CERTIFICATE		Additional Fee required a Certificate of Status	
Names and Street Addresses of Each Officer and Name of Officers	/ar Director (Flori	Stre	et Address of Each	t 3 directors)			
Title(s) and/or Directors	le(s) and/or Directors 2		icer and/or Director e Post Office Box Nu	umbers) , 4 City / State / Zip		/ Zip	
P/S/D Diego Catano 9		9651 SW 152nd Ave.			Miami, FL 33196		
			•	h in	00004740! -12/27/010 *****150.00	550—1 1017-012 ****150.00	
8. Name and Address of Current	Registered Agen			9 Name and A	ddress of New Registered Age	ant .	
Diego Catano 9651 SW 152nd Avenue Miami, FL 33196			Name Name Name Name Name Name Name Name				
10. I, being appointed the registered agent of the ab	ove named corpor	ation, am familiar wil	h and accept the obli	igations of Section		·	
Signature of Registered Agent Ducy C	EGISTERED AGE	> ENT MUST SIGN			Date12/12/01		
 This corporation owes the current year Intangible Personal Property Tax due June 30. 				No 🗆	(See other side to on intengit		
12. I certily that I am an officer or director or the receible reinstalement application, the reason for discowed by the corporation have been paid and the on this application is true and accurate, and my s	olution has been e names of individu	aliminated, the corpo als listed on this for	rate name satisties the n do not qualify for a	ne requirements n exemption und	of section 607.0401 or 617.0401	, F.S., that all fees	
SIGNATURE: SIGNATURE AND TYPES OR PE	LECTION NAME OF SI	GNING OFFICER OR D	HECTOR	12/1	.2/01 (305)591- Date Daylin	-1554 ne Phone #	

December 12, 2001

Department of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32314

RE: Catur Investments Corp. Document # P00000037099

Dear sir/madam:

As per our telephone conversation, enclosed is our application for reinstatement along with a check for the reinstatement fee of \$150.00. I frequently travel internationally, and during my absences I had problems with my mail service. As a result, I never received an Annual Report and missed the deadline for reinstatement.

I would also like to request that my mailing address be changed to the following:

8370 W. Flagler Street, #234 Miami, FL 33144

If you have any questions, please contact me.

Thank you,

Diego Catano President