PLEASE READ A	ALL INSTRUCT	IONS BEFORE	COMPLETING THIS FORM.	
CORPORATION REINSTATEMENT	Secretar	TMENT OF STATE y of State corporations	FILED 04 JUN -4 PM 5: 35 SHORE TARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # P0000037625			0 6./04014 01002 012 **0.75	
Bravo Auto Brokers, Inc.		500037665455 06/04/04-01033011 **300.00		
2. Principal Office Address 1036 N.W. Court Suite, Apt. #, etc.	3. Mailing Office Address Same Suite, Apt. #, etc.		500037665455 06/04/0401033012 **8.75	
City & State	Same City & State	e	4. Date Incorporated or Qualified To Do Business in Florida 04/1.3/-2000	
HallandALe Beach, FL Zip 33009 U.S.A	_Same Zīp Same	Country	5. FEI Number Applied For Not Applied For Not Applied For STATUS DESIRED STATUS DESIRED CONTROL OF STATUS DESIRED Applied For Not Applied For	
Name ELi Bacha: Street Address (P.O. Box Number is No	r c/o Bravo	Address of Current Regis Auto Broker st. court		

City Hallandale Beach,	State FL	Zip Code 33009	
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of sect Signature of Registered Agent REGISTERED AGENT MUST SIGN	ion 607.050 Date _	5 or 617.0503, F.S. 05 /28 /04	
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)							
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip				
p/d	Eli Bacher	1036 N.w 1st. court	Hallamdale Beach?				
			10.1				
			140018				
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10. 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 SIGNING OFFICER OR DIRECTOR

ITZHAK BACHAR, P.A.



LAW OFFICE

May 28, 2004

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Bravo Auto Brokers, Inc

Dear Sir/Madam:

....

Please be advised that the undersigned attorney represents the interest of Bravo Auto Brokers, Inc. It has come to our attention that the last event for this corporation is an Administrative Dissolution. Bravo Auto Brokers, did not receive the annual reports forms for the years 2002 and 2003 and therefore were unable to pay the annual fees. We are asking that the reinstatement fee be waived. Enclosed please find a Wachovia Official bank check number 291810376 in the amount of Three Hundred Dollars (\$300.00) as a fee for each annual reports missing.

I appreciate all your kind courtesy in handling this matter.

Very truly fours,

ITZHAK BACHAR, P.A

J**y**/gp

Date: May 28, 2004

Re: Bravo Auto Brokers, Inc

I, ELI BACHAR as Registered agent for Bravo Auto Brokers, Inc affirm that I have not receive the annual report forms for the years 2002 and 2003 and therefore I was unable to pay the annual fees. On behalf of Bravo Auto Brokers, Inc I am requesting that the reinstatement fee be waived, upon receipt of Three Hundred Dollars (\$300.00) for each missing annual report.

ELI BACHAR, Registered Agent