

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P00000047134

1. Corporation Name

PARAISO TRADING, INC.

2. Principal Office Address

8200 NW 52ND TER

3. Mailing Office Address

8200 NW 52ND TER

Suite, Apt. #, etc.

SUITE: 102

Suite, Apt. #, etc.

SUITE: 102

City & State

DORAL FL

City & State

DORAL FL

Zip

33166

Country

USA

Zip

33166

Country

USA

FILED

2007 JAN 16 PM 4:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

500086166875

01/25/07--01003--024 **1050.00

CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida

05/11/2000

5. FEI Number

20-8219783

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

GAARRIN & ASSOCIATES, INC.

Street Address (P.O. Box Number is Not Acceptable)

8200 N.W. 52ND TERRACE

Suite, Apt. #, Etc.

SUITE: 102

City

DORAL

State

FL

Zip Code

33166

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

01/12/07

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
PD	ALFREDO SILVA	13431 SW 34TH ST	MIAMI FL 33175
VD	MARCO GARCIA	8200 NW 52ND TER SUITE 102	DORAL FL 33166
SD	GUILLERMO ARRINDELL	14900 SW 104TH ST #59	MIAMI FL 33196

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 contained in Chapter 119, 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

Date

01/12/07

Daytime Phone #

Phed

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED THE ANNUAL REPORT NOTICE FOR THE YEARS OF 2001, 2002, 2003, 2004, 2005, 2006 AND I AM ALSO INCLUDING 2007 TO PAY THE ANNUAL FEE. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS COMPANY IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY,



GUILLERMO ARRINDELL
DIRECTOR