

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 FEB 18 PM 1:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>CORPORATION</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <b>P00000049024</b>			
1. Corporation Name <b>Consuelo's Porcelain Art</b>			
2. Principal Office Address <b>9300 SW 62 ST</b>		3. Mailing Office Address <b>9300 SW 62 ST</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>Miami</b>		City & State <b>Miami</b>	
Zip <b>33173-2304</b>	Country <b>Dade</b>	Zip <b>33173-2304</b>	Country <b>Dade</b>

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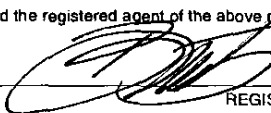
4. Date Incorporated or Qualified To Do Business in Florida <b>May 17, 2000</b>	
5. FEI Number <b>65-1017562</b>	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> <small>8075 Additional Fee required for a Certificate of Status</small>	

7. Name and Address of Current Registered Agent

Name <b>Viridian C. Barbeito</b>	
Street Address (P.O. Box Number is Not Acceptable) <b>9300 SW 62 ST</b>	
Suite, Apt. #, Etc.	
City <b>Miami</b>	State <b>FL</b>
	Zip Code <b>33173-2304</b>

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 **01-31-02**

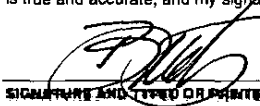
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Consuelo Perez	9300 SW 62 ST	Miami, FL 33173
VP	Viridian C. Barbeito	9300 SW 62 ST	Miami, FL 33173
T	Jose F. Acuna <small>Addition</small>	9300 SW 62 ST	Miami, FL 33173

01-02 412-8186

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

01-31-02 (305) 412-8186

Date

Daytime Phone #

Consuelo's Porcelain Art, Inc.  
9300 South West 62<sup>nd</sup> Street  
Miami, Florida 33173  
305-412-8186  
305-477-0610

*Page 2 of 2*

February 6, 2002

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

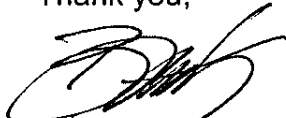
Dear Sir or Madam:

This letter will serve to explain the reason for not filing the Corporate annual report for the year 2001 for Consuelo's Porcelain Art, Inc. Please be advised that unfortunately the form was never received.

As instructed by one of your representatives we are hereby enclosing (\$300) three hundred dollars for the two years now due and a Corporate Reinstatement Form.

If any further action to correct this matter will be required please contact us at the address and/or phone number on the letterhead.

Thank you,



Viridian C. Barbeito  
Vice-President  
Consuelo's Porcelain Art Inc.