PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 JUL 13 PM 4:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000060467

**1.** Corporation Name

PIMENTEL DOTTIN ENTERPRISES, INC.

REINSTATEMENT 03-04

| **2.** Principal Office Address | **3.** Mailing Office Address |
|---|---|
| Avenida John F. Kennedy #20 | 299 Alhambra Circle |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| Esquina Maximo Gomez | Suite 403 |
| City & State | City & State |
| Torre Popular | Coral Gables, Florida |
| Zip / Country | Zip / Country |
| Republica Dominicana | 33134 / USA |

**4.** Date Incorporated or Qualified To Do Business in Florida: 06/22/00

**5.** FEI Number: 651085248 — 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: Jorge E. Rodriguez

700038283507
07/13/04--01067--005 **150.00

Street Address (P.O. Box Number is Not Acceptable): 299 Alhambra Circle

700038283507
06/25/04--01051--008 **750.00

Suite, Apt. #, Etc.: Suite 403

City: Coral Gables — State: FL — Zip Code: 33134

**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: _____ Date: 5/19/04

REGISTERED AGENT MUST SIGN

**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 |
|---|---|---|---|
| D/P/T | Mickey Alex Pimentel Miller | Avenida John F. Kennedy #20 Esquina Maximo Gomez | Torre Popular Republica Dominicana |
| D/V/S | Wanda Dottin de Pimentel | Avenida John F. Kennedy #20 Esquina Maximo Gomez | Torre Popular Republica Dominicana |
| | | | |
| | | | |
| | | | |
| | | | |

**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: Mickey Pimentel/M. Wanda D. de Pimentel — 5/31/04 — (305) 444-0032

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #