

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

ppr/sh

<b>CORPORATION</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> <b>Secretary of State</b> <b>DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT #</b> P00000068857			
<b>1. Corporation Name</b> LA Esperanza Carpentry, Corp.			
<b>2. Principal Office Address</b> 12331 SW 39 Terr		<b>3. Mailing Office Address</b> 12331 SW 39 Terr	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
<b>City &amp; State</b> MIAMI, FL		<b>City &amp; State</b> MIAMI, FL	
<b>Zip</b> 33175	<b>Country</b> USA	<b>Zip</b> 33175	<b>Country</b> USA

FILED

02 JAN 29 AM 11:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

500004881745--1

-02/05/02--01093--007

\*\*\*\*300.00 \*\*\*\*300.00

<b>4. Date Incorporated or Qualified To Do Business in Florida</b> 07/19/00	
<b>5. FEI Number</b> 65-1030166	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

<b>7. Name and Address of Current Registered Agent</b>		
<b>Name</b> Eliezer Fernandez		
<b>Street Address (P.O. Box Number is Not Acceptable)</b> 12331 SW 39 TERRACE		
<b>Suite, Apt. #, Etc.</b>		
<b>City</b> MIAMI	<b>State</b> FL	<b>Zip Code</b> 33175

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**

Eliezer Fernandez

REGISTERED AGENT MUST SIGN

**Date**

01/24/02

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/D	Eliezer Fernandez	12331 SW 39 Terr.	MIAMI FL-33175

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:**

Eliezer Fernandez Eliezer Fernandez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Date**

01/24/02

**Daytime Phone #**

305-5513086

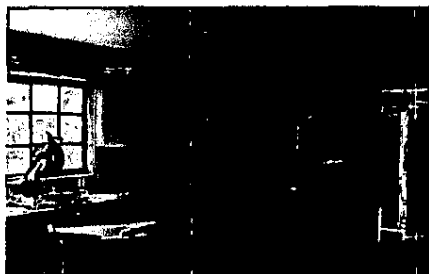
**La Esperanza Carpentry Corp.**

Office (305) 551-3086

Fax (305) 480-9864

Cell (305) 987-5979

Page 2 of 2



To: Department of State

Attn: Division of Corporations

To May it whom concern,

This letter will serve as a request for reinstate La Esperanza Carpentry Corp. as a State of Florida Corporation. Due to our company's address change We never received the renew form for 2001. For this reason La Esperanza Carpentry Corp. appears as an inactive corporation in your records. The new address for our company is:

**12331 SW 39 Terrace  
Miami FL 33175**

Please waive the late fee.

I thank you in advance for your understanding and help with this matter.

Sincerely,

Eliezer Fernandez  
President

**La Esperanza Carpentry Corp.**