

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 FEB 25 AM 8:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 00000079387
1. Corporation Name
MARROCO CONSULTING GROUP, INC.

REINSTATEMENT 02-03

900013045019
02/24/03--01094--021 **150.00

2. Principal Office Address <u>18543 NW 55 AVE</u> Suite, Apt. #, etc.		3. Mailing Office Address <u>SAME</u> Suite, Apt. #, etc.	
City & State <u>MIAMI, FL</u>		City & State	
Zip <u>33055</u>	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida <u>08/10/00</u>	
5. FEI Number <u>04-3738632</u>	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent

Name <u>ROLANDO RODRIGUEZ</u>		
Street Address (P.O. Box Number is Not Acceptable) <u>18543 N.W. 55 AVE</u>		
Suite, Apt. #, Etc.		
City <u>MIAMI</u>	State <u>FL</u>	Zip Code <u>33055</u>

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 Rolando Rodriguez Date 02/12/03
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
<u>PRES</u>	<u>MARILENA MARROCO R.</u>	<u>12505 NW 23 ST</u>	<u>TEMPERANCE PINES, FL 33028</u>
<u>CEO</u>	<u>FREDDY RODRIGUEZ</u>	<u>" "</u>	<u>" " "</u>
<u>TREAS.</u>	<u>ROLANDO RODRIGUEZ</u>	<u>18543 NW 55 AVE</u>	<u>MIAMI, FL 33055</u>

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: Rolando Rodriguez ROLANDO RODRIGUEZ 02/12/03 305/372-6873
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (10/02)

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