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FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THE STATE PM 1: 17

	RPORATI ISTATEM	•		S	DEPART secretary	of Sta				SECI TALL	AT CE AHASSE	STATE E, FLORIDA	
DOCUMENT # P00000082697 1. Corporation Name													
NAVES Y SERVICIO CORPORATION													
2- Principal Office Address - No P.O. Box # 7570 NW 14TH ST 7570 N					NW 14TH ST			CR2E081 (1/07)					
				Suite, Apt. #. 112	Suite, Aprt. #, etc. 112				4. Date Incorporated or Qualified 70 Do Business in Florida 08/31/2000				
City & State MIAMI FL				City & State MIAMI FL			5. FEI Nu		65-103		Applied For		
^z ₀ 3312	26	US	y .	33126		Country	1	6.	ICATE OF	STATUS DES		Additional Fee required a Certificate of Status	
7. Name and Address of Current Registered Agent													
Name LUIS H ROJO								LV_1	The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement				
Street Address (P.O. Box Number is Not Acceptable) 7570 NW 14TH ST													
Suite, Apt. #. Etc. 112								rec					
City MIAMI						State	33126	Tee	fee be waived.				
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the of Signature of Registered Agent REGISTERED AGENT MUST SIGN									obligations of section 607,0505 or 617,0503, F.S. Date				
9. Name	and Street A	ddressos	of Each Officer and	Vor Director (Fic	nida nonpre	ofit carpon	le tell teum enotte	least 3 director	rs)	 :			
Title\$	Name of Officers and/or Directors				Street Address of Each Officer and/or Director			¢h lor			City / State	:/Zlp	
Р	LUIS H ROJO			7570 NW 14TH ST			STE 1	12	MI	AMI FL	. 33126		
VP	MARIA E SERNA				7570 NW 14TH ST			STE 1	STE 112 MIAMI FL 33126			. 33126	
					,,,	_			\perp				
	1	3 F	INST	<u>'A'T'D</u>	7/1	יזאכ	T	RH		**			
			VT 40 T	VI E	TATE	CIN_	1	4 -5 11					
owed i	by the corporate application is	tion have true and	. The reason for diss	olution has been names of individ ignature shall bs	i eliminated Upis listed d Ive the sam	, the corps on this for e legal eff	orate name satisfi n do not quality fo fact as if made un:	es the requiren or an exemption	ments of a	ecrica 607 A	101 or 617.046 r 119, F.S. The	scriffy that when filing 01, F.S., mat all fees Information indicated	

Division of Corporations

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Florida Department of State

Division of Corporations Public Access System

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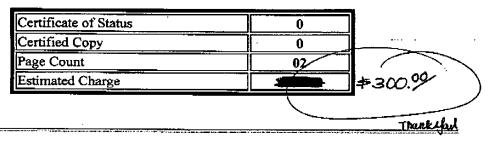
From:

Account Name : ADVANCE CORPORATE SERVICE, INC.

Account Number : 120070000146
Phone : (305)406-3800
Fax Number : (305)406-3999

CORPORATION REINSTATEMENT

NAVES Y SERVICIO CORPORATION



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