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## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORMICIAED

## CORPORATION REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

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DOCUME 1. Corporation N		00108	301	7				SECRETARY FALLAHASSEE	E, FLOF	NDA	j.
PED	IZIN OF MIR	ami K	EA.	CTY-	INC.	<b>10</b> 570	<b>100</b> 3/03	<b>18563</b> 01065010	382 **103	68.75	
			ffice Address W 34457			REIN	STA	ITEMEN		)1-(	)=
Suite, Apt. #, etc.		Suite, Apt. #, etc.			!	4. Date Incorp			11 <del></del>		
City & State HI ALE	AH FL	City & State  HI ALE	ÐAH.	FL		5. FEI Numbe	r	<sup>rida</sup> 20-2000 8.5	<b>├</b>	pplied For	
3301z	Country	Zip 3301		Country US	5A	6. CERTIFICATE		S DECUDED N \$8.75	150	al Fee requ	SE 38
	to the second se	<b>7.</b> Nam	e and Add	iress of Curr	ent Register	ed Agent		<u> </u>	Tarket 1		C. Colored
Nar	PEDRIN	1. VA	. 21	EVI	<u> </u>	<del></del>				-	
Stre	eet Address (P.O. Box Number is N	ot Acceptable)		C/07	<i>.</i>				<del> </del>		
Sui	te, Apt. #, Etc.			<del> </del>				<u> </u>		1	
City	MACEDE		<u>-</u>				State FL	Zip Code 330/2	<b>-</b>		
8. I, being appoint Signature of Registered Agent	nted the registered agent of the abo	ve named corporation	Lec	One		oligations of section	on 607.050 Date	05 or 617.0503, F.S. MONCH	28.	.03	
9. Names and S	treet Addresses of Each Officer and				must list at lea	ast 3 directors)	• • • • •		· <u>*</u> · <u>·</u>		
Titles	Name of			Street Address of Each Officer and/or Director			City / State / Zip				
PD	PEDRIN A-VA	BUEN .	537	850	W 134	44	MI.	SAMAR	FL.	3302	27
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this reinstate	am an officer or director or the rece ment application, the reason fer dis-	olution has been eli	minated, th	ne corporate r	nme satisfies	the requirements	of section	607.0401 or 617.040	)1, F.S., th	at all fees	. }

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

PEDDIN A-VAZEUENA

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