

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 OCT 28 PM 12:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000112261

1. Corporation Name

EXINLAT EXPORT INTERNACIONAL LATINOAMERICA, INC.
11604 NW 51 TERRACE, MIAMI, FLORIDA 33178

2. Principal Office Address

Suite, Apt. #, etc.

City & State

MIAMI, FLORIDA

Zip

33178

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

**4. Date Incorporated or Qualified
To Do Business in Florida**

12/07/2000

5. FEI Number

65-1061959

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

☒ \$8.75 Additional Fee required
for a Certificate of Status

700042703887

11/12/04--01073--006 **908.75

7. Name and Address of Current Registered Agent

Name

LUIS ENRIQUE MARTINEZ

Street Address (P.O. Box Number is Not Acceptable)

11604 NW 51 TERRACE

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33178

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

Luis Enrique Martinez

REGISTERED AGENT MUST SIGN

Date 10/27/2004

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	LUIS ENRIQUE MARTINEZ	11604 NW 51 TERRACE	MIAMI, FLORIDA 33178
VP	KARINA DEL V MARTINEZ PEREZ	11604 NW 51 TERRACE	MIAMI, FLORIDA 33178
S	MARIANELA BOSCAN	11604 NW 51 TERRACE	MIAMI, FLORIDA 33178

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:

Luis Enrique Martinez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/27/04

Date

Daytime Phone

CR2E081 (01/04)