

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 JUL -1 AM 9:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 001000022190

1. Corporation Name

HEMA INVESTMENTS, INC.

2. Principal Office Address

12031 SW 131 AVE

Suite, Apt. #, etc.

City & State

MIAMI, FL

Zip

33186

Country

USA

3. Mailing Office Address

12031 SW 131 AVE

Suite, Apt. #, etc.

City & State

MIAMI, FL

Zip

33186

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

03/01/01

5. FEI Number

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

HENRY A. MARQUEZ

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

12031 SW 131 AVE

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33186

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

Henry A. Marquez

REGISTERED AGENT MUST SIGN

Date

6/26/03

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
PRES.	HENRY A. MARQUEZ	12031 SW 131 AVE	MIAMI, FL 33186
SEC.	MARLENE BLANCO	12031 SW 131 AVE	MIAMI, FL 33186

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapters 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

Henry A. Marquez

Date

6/26/03

Daytime Phone #

305-228-2888

CR25081 (10/02)

7/7/03

June 26, 2003

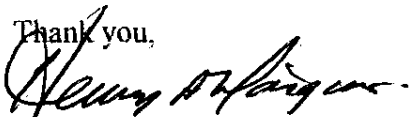
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: HEMA Investments, Inc. Doc# P01000022190

To whom it may concern,

As per our conversation by telephone, we ask that you please waive the Reinstatement Fee since we did not receive the Annual Filing Forms for the above Corporation. We have updated our address information on the enclosed Reinstatement Form. We have also attached a check in the amount of \$300.00 required for (2) years filing (2002,2003).

Thank you,



Henry A. Marquez