

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000036217

1. Corporation Name

LOGIMEX TRADING CORP.

2. Principal Office Address

7575 W. Flagler St.

3. Mailing Office Address

7575 W. Flagler St.

Suite, Apt. #, etc.

204

Suite, Apt. #, etc.

204

City & State

Miami FL

City & State

Miami FL

Zip

33144

Country

USA

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-1095600

Applies For

No: Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

CR2E081 (12/05)

7. Name and Address of Current Registered Agent

Name

Alves Valerio, Loreta H

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

7575 W. Flagler St.

Suite, Apt. #, Etc.

204

City

Miami FL

State

FL

Zip Code

33144

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

Loreta Valerio

REGISTERED AGENT MUST SIGN

Date

April 6, 2006.

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 |
|--------|--------------------------------------|---|--------------------|
| PD | DE SOUZA FILHO, MARCUS V | 7575 W. Flagler St. | Miami FL 33144 |
| VD | RODRIGUES, OTAVIO G | 7575 W. Flagler St. | Miami FL 33144 |
| SD | ALVES VALERIO, LORETA H | 7575 W. Flagler St. | Miami FL 33144 |
| | | | |
| | | | |
| | | | |

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 contained in Chapter 119, 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:

Loreta Valerio

Loreta H. Valerio Alves

April 6, 2006.

305-433-3673

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LOGIMEX TRADING CORP.
7575 West Flagler St. Suite # 204
Miami, Florida 33144

State of Florida
Division of Corporations
Clifton Building,
Tallahassee, Florida 32301

Ref: Reinstatement of
Logimex Trading Corp.
Doc # P01000036217

Dear Sirs:


Because of the change in our business address, we have not received our annual report notices. We kindly request the reinstatement fee be waived.

At the time of the address change, We had requested a part-time employee to drop a change of address form at the U.S. Postal Office which now, we believe was never done.

Furthermore, talking to the Florida Department representative, we were instructed to send a check in the amount of \$ 600.00 to pay reinstatement fee charges.

Thank you in advance for your kind attention,

Sincerely


Loreta A. Valerio
Secretary