
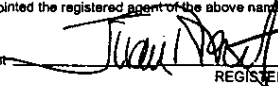
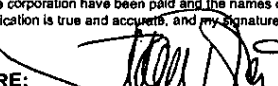


FILED

03 OCT -3 AM 8:32

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. SEE FLORIDA SECRETARY OF STATE

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P010000066981			
1. Corporation Name EASY CAPITAL & DEVELOPMENT GROUP, INC			
2. Principal Office Address 40 NE 1ST AVE		3. Mailing Office Address 645 N SHORE DR	
Suite, Apt. #, etc. SUITE 402		Suite, Apt. #, etc.	
City & State MIAMI FL		City & State MIAMI FL	
Zip 33141	Country USA	Zip 33141	Country USA
		4. Date Incorporated or Qualified To Do Business in Florida 7/02/01 5. FEI Number 05-1116710 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/> 6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent			
Name JUAN PERALTA			
Street Address (P.O. Box Number is Not Acceptable) 645 N SHORE DR			
Suite, Apt. #, Etc.			
City MIAMI		State FL	Zip Code 33141
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 		Date 9/23/03	
REGISTERED AGENT MUST SIGN			
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	JUAN PERALTA	645 N SHORE DR	MIAMI FL 33141
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)(f), 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: 		Date 9/23/03 786-683-4111	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR3ED01 (10/02)

90000234908:89
10/02/03--01004--024 #158.75

2/10/6

Tuesday, September 23, 2003

To whom it may concern:

I didn't receive any notices on 2003 regarding the corporate resolutions. Please waive the re-instatement fee of \$600.00

Please don't hesitate to call if you have any questions.

Thank you,

A handwritten signature in black ink, appearing to read 'Juan Peralta', with a long horizontal stroke extending to the right.

Juan Peralta