PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P01000082633

1. Corporation Name

ANAYA CORPORATION

Principal Place of Business

-188896" SW 28 COURT MIRAMAR FL 33029 Mailing Address

-198999-SW 28 COURT MIRAMAR FL 33029 FILED

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If above	addresses are	e incorrect in any way, line	through incorrect	information an	d enter correction l	pelow.						
2. New Principal Office Address, If Applicable 186966.W. 28 Suite, Apt. #, etc. 3. New Mailing Office Address 186665.W. Suite, Apt. #, etc.						If Applicable 4. Date Incorporated or Qualifier				08/20/2001		
Suite, Apt. #							5. FEI Numbe	ar	Т			
City & Star	te r	C I	City & State				_	3-4294	-	Applied For		
<u>Mirar</u>	TKU,	Country	Mira	mar	,ŦL		6.	<u> </u>		Not Applicabl		
<u>3302</u>		US A	3302		Country USA		CERTIFICATI	E OF STATUS DESIRED	\$8.75 Add for a Ce	itional Fee requir		
7. Names	and Street Ad	ddresses of Each Officer a	nd/or Director (Fl	orida nonprofit	corporations must	list at lead	st 3 directors)					
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip					
DPS	MERIDA, JENNY MANZANO-			18896 SW 28 COURT -			MIRAMAR FL 33029					
-DVT	-SILVA, MA	ARIA ALEJANDR		188896 S	V 28 COURT			MIRAMAR FL 33029	•••			
DVT	MANZANO, VICTORIA			1889	6 S.W.	28	Coult	Miramas,	FI 3	3029		
M	HURI	ADG, EVA		1889	6 5.W	. 28	Coolt	Miramar	Fl S	33029		
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<u></u>					SB.	N/R	[17047	0201101009	**1 5	0.00		
	8. Nam	e and Address of Curren	t Registered Age	ent	7		9. Name and A	ddress of New Register	ed Agent			
MEDID	A PENING A	141174110			Name				3-			
	A, JENNY M				Street Ad	droce (D.	O Day Mouth and					
-168696 SW 28 COURT*					Street Address (P.O. Box Number is Not Acceptable)							
MIRAMAR FL 33029				Suite, Apt		<u> </u>	<u> 20 auji i i</u>					
					<u> </u>							
					MINO	m			L Zip Co	ထီဥရ		
0. I, being	appointed the	registered agent of the at	nove named corpo	ration am form	ilior with and secon	<u> </u>			L	<u> </u>		
ignature of egistered A		coffu	fuca	N <u>KOT</u> U	PIIBE		gations of Section		0505, F.S.			
			EGISTERED AGI		· · · · · · · · · · · · · · · · · · ·							
I certify this reins owed by	that I am an of tatement appliance the corporation	fficer or director or the rece lication, the reason for diss on have been paid and the	iver or trustee em	powered to ex eliminated, the	ecute this applicati corporate name sa	on as provatisfies the	vided for in chap e requirements o	oter 607 or 617, F.S. I furt of section 607.0401 or 617	ner certify th	at when filing , 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/31/02

(954)699-7692

Daytime Phone #

ANAYA CORPORATION 18896 SW 28 COURT

MIRAMAR FL 33029 Telf 954-699-7692

Miramar, October 31st 2002

FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State Division of Corporations P.O BOX 6327 Tallahassee, Florida 32314

The present letter is to inform you that we are in the process of reinstating the ANAYA CORPORATION, because never received the prior notice for the Uniform Business Report (UBR) at our present address.

Attached is the proper documentation and fees in order to reactivate de Corporation.

Thanks in advance for everything

Jenny Manzano-Merida

Director