

| APPLICATION<br>FOR<br>REINSTATEMENT   |  | FLORIDA DEPARTMENT OF STATE<br>Katherine Harris<br>Secretary of State<br>DIVISION OF CORPORATIONS   |  |
|---|--|---|--|
| <b>DOCUMENT #</b> <u>PO1000088147</u><br><b>1. Corporation Name</b><br>Southwest Investments Inc.   |  | <b>FILED</b><br><b>03 MAY -5 AM 11:01</b><br><b>SECRETARY OF STATE</b><br><b>TALLAHASSEE, FLORIDA</b>   |  |
| <b>Principal Place of Business</b><br><br><b>Mailing Address</b><br><br>  |  | <b>3. Date Incorporated or Qualified</b><br>9/6/2001  |  |
| <b>2. Principal Place of Business</b><br><b>21</b> 8550 NW 33rd Street<br>Suite, Apt. #, etc.<br><b>22</b> Suite 200<br>City & State<br><b>23</b> Miami FL<br>Zip      County<br><b>24</b> 33122 <b>25</b>  |  | <b>2a. Mailing Address</b><br><b>26</b><br>Suite, Apt. #, etc.<br><b>27</b><br>City & State<br><b>28</b><br>Zip      County<br><b>29</b> <b>30</b>  |  |
| <b>4. FBI Number</b><br>65-1135407  |  | <b>Applied For</b><br><input type="checkbox"/> Not Applicable   |  |
| <b>5. Certificate of Status Desired</b> <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>   |  | <b>6. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>   |  |
| <b>8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes</b> <input type="checkbox"/> Yes <input type="checkbox"/> No   |  |   |  |
| <b>9. Name and Address of Current Registered Agent</b><br>Fernando Garcia<br>3211 Ponce de Leon Blvd. Suite 202<br>Coral Gables, FL 33134   |  | <b>10. Name and Address of New Registered Agent</b><br><b>81</b> Name <u>Fernando Garcia</u><br><b>82</b> Street Address (P.O. Box Number is Not Acceptable)<br><u>8500 N.W. 33rd Street</u><br><b>83</b> <u>Suite 200</u><br><b>84</b> City <u>Miami</u> <b>FL</b> <b>85</b> Zip Code <u>33122</u> |  |
| <b>11. Pursuant to the provisions of Sections 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.</b><br><b>SIGNATURE</b> <u>K. Sarria</u> as attorney-in-fact for <u>Fernando Garcia</u> <u>5/2/03</u><br><small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>   |  |   |  |
| <b>12. OFFICERS AND DIRECTORS</b>   |  | <b>13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12</b>  |  |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>  | <u>President</u> <input type="checkbox"/> DELETE<br><u>Fernando Garcia</u><br><u>3211 Ponce de Leon Blvd. STE 202</u><br><u>Coral Gables, FL 33134</u> | <b>1.1 TITLE</b><br><b>1.2 NAME</b><br><b>1.3 STREET ADDRESS</b><br><b>1.4 CITY-ST-ZIP</b>  | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> DELETE  | <b>2.1 TITLE</b><br><b>2.2 NAME</b><br><b>2.3 STREET ADDRESS</b><br><b>2.4 CITY-ST-ZIP</b>  | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br><b>100018938811</b><br><b>05/14/03--01039--015 **308.75</b> |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> DELETE  | <b>3.1 TITLE</b><br><b>3.2 NAME</b><br><b>3.3 STREET ADDRESS</b><br><b>3.4 CITY-ST-ZIP</b>  | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
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| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>  | <input type="checkbox"/> DELETE  | <b>6.1 TITLE</b><br><b>6.2 NAME</b><br><b>6.3 STREET ADDRESS</b><br><b>6.4 CITY-ST-ZIP</b>  | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| <b>14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, or on attachment with an address.</b><br><b>SIGNATURE</b> <u>K. Sarria</u> by K. Sarria as attorney-in-fact for <u>Fernando Garcia</u> <u>5/2/03</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> |  |   |  |

Florida Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399


Re: Southwest Investments Inc.

Enclosed are the following:

1. Uniform Business Report for the company referenced above.
2. check payable to Florida Department of State

308.75

We never received the Uniform Business Report that should have been mailed to us. Please waive the late filing fee and treat the company as never being administratively dissolved. Thank you.

By:   
by K. Sarria as attorney-in-fact

Name: Fernando Garcia

Title: President

Date: 5 / 2 / 03