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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT UCR

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 MAR 24 AM 11:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000088736

1. Corporation Name

ARIMER ENTERPRISE, INC.

2. Principal Office Address	**3.** Mailing Office Address
2553 S. Semoran Blvd.	2553 S. Semoran Blvd.
Suite, Apt. #, etc. Apto. 1938	Suite, Apt. #, etc. Apto. 1938
City & State Orlando FL.	City & State Orlando, FL.
Zip 32822 Country U.S.A.	Zip 32822 Country U.S.A.

5-21-02 91165-037 150.00

4. Date Incorporated or Qualified To Do Business in Florida Sept. 04, 2001

5. FEI Number 59-3744996 — Applied For — Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Mercedes Vazquez

Street Address (P.O. Box Number is Not Acceptable): 2553 S. Semoran Blvd.

600014559916
03/24/03--01090--006 **150.00

Suite, Apt. #, Etc.: Apto. 1938

City: Orlando | State: FL | Zip Code: 32822

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 3-18-03

REGISTERED AGENT MUST SIGN

CR2E081 (10/02)

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.	Mercedes Vazquez	2553 S. Semoran Blvd Apto. 1938	Orlando, FL. 32822
Sec/Treas.	Abdiel Vazquez	2553 S. Semoran Blvd. Apto. 1938	Orlando FL. 32822

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)(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: Abdiel Vazquez Atty. Abdiel Vazquez 3/18/03 407-348-4159

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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March 18, 2003

Department of State
Division of Corporations
409 East Gaines ST.
Tallahassee, FL 32399

Dear Sirs,

Through this letter I summit to you the form **"Corporation Reinstatement"** from **ARIMER ENTERPRISES, INC**. Document No. **P01000088736 filed on 09-04-01.** According with telephone conversation today March 18, 2003, with one of the specialist on the reinstatement department, the annual report form, for a year 2002, was return to me, for incomplete information in there, but I never received the form return to me, for that reason I like to ask a waiver on the penalty for non-renewal annual report form.

Please consider this circumstantial reasons as an excuse for my request. Enclose one hundred fifty ($150.00) dollars for a corporation fees on 2003. Thank for you attention to this important matter.

Sincerely Yours

Ariel Vergara
Officer
Arimer Enterprises, Inc.