

FILED

03 OCT 16 AM 8:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION REINSTATEMENT**

**FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS**

DOCUMENT # P01000114871

1. Corporation Name **DORAL JEWELERS CORP.**

2. Principal Office Address  
4297 NW 107th Ave  
Suite, Apt. #, etc.

3. Mailing Office Address  
4297 NW 107th Ave  
Suite, Apt. #, etc.

City & State  
Miami FL

City & State  
Miami FL

Zip 33178 Country Dade

Zip 33178 Country Dade

200023855482  
10/16/03--01050--010 \*\*150.00

REINSTATEMENT

4. Date Incorporated or Qualified To Do Business in Florida **Dec 4, 2001**

5. FEI Number **800020493**

6. CERTIFICATE OF STATUS DESIRED  \$875. Additional Fee required for a Certificate of Status.

7. Name and Address of Current Registered Agent

Name **LENDOIRO, RAFAEL JR.**

Street Address (P.O. Box Number is Not Acceptable)  
**4297 N.W 107th Ave**

Suite, Apt. #, Etc.

City **Miami FL 33178**

State **FL** Zip Code **33178**

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0605 or 617.0503, F.S.

Signature of Registered Agent *[Signature]* REGISTERED AGENT MUST SIGN

Date **10/13/03**

9. Name and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
ED	LENDOIRO, RAFAEL	4297 N.W 107th Ave	Miami FL 33178
VPD	LENDOIRO, MARLENE	4297 N.W 107th Ave	Miami FL 33178

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)(X), 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]* **President** Date **10/13/03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*[Signature]* Vice President

CR2501 (10/02)

October 10, 2003

Uniform Business Report  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

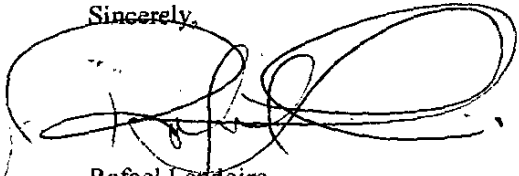
Re: Doral Jewelers Corp,  
Doc. Number P01000114871

To Whom It May Concern:

This letter is in regards to the corporation annual report for the 2003 filing year. According to your records, you never received an annual report for our corporation. We are sending a filled out blank report to your Department because we never received the original report. Please accept our apologies and accept this \$150.00 filing fee. We never meant to send the report late, if we would have received the report, we would have sent it on time. We apologize for any inconvenience this may have caused.

If you have any questions please feel free to contact me at (305) 541-3980.

Sincerely,



Rafael Lendoiro  
President

*[Faint, illegible text, likely bleed-through from the reverse side of the page]*