PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 APR 19 PM 12:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000015283

1. Corporation Name

Reef Brothers Inc.

400033096284
04/19/04--01074--004 **300.00

REINSTATEMENT 05-04

2. Principal Office Address	**3.** Mailing Office Address
1651 N.E. 8th. Street	1651 N.E. 8th. Street
Suite, Apt. #, etc.	Suite, Apt. #, etc.
P.M.B 145	PMB 145
City & State	City & State
Homestead, FL	Homestead, FL
Zip / Country	Zip / Country
33030 / Dade	33030 / Dade

4. Date Incorporated or Qualified To Do Business in Florida 02-11-02

5. FEI Number 03-0387265 ☐ Applied For ☐ Not Applicable

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

Daniel

7. Name and Address of Current Registered Agent

Name: Daniel Gutierrez
Street Address (P.O. Box Number is Not Acceptable): 14500 S.W. 280 St.
Suite, Apt. #, Etc.: Lot # 53
City: Naranja, State: FL, Zip Code: 33032

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 X Daniel Gutierrez — REGISTERED AGENT MUST SIGN — Date 04-16-04

CR2E081 (01/04)

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 P.	Daniel Gutierrez	14500 S.W. 280 St. # 53.	Naranja, FL 33032-

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: X Daniel Gutierrez — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date 04-16-04 — Daytime Phone # (305) 2163288