PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| | | | | Secretar | ry of State | | | , | | 03 OCT -9 | THE COLUMN | ĵ. | |
|---|---|--|--|--|--|--|--|--|--|---|---|--|--|
| UMEN ⁻ oration Name | Γ#₽ | 02 00 | 00196 | 40 | | | | | | | | · | |
| LYEKO (| CORP | ORATION | | | | | l' | | | | 三翼 | • | |
| | | | | | | | | | | | | | |
| 2. Principal Office Address 2100 Ponce De Leon Blvo | | | | 3. Mailing Office Address | | | | 2/ 1-1-1- 0 HICA 6 | | | | | |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | | | | | | | |
| Suite 600 City & State | | | City & State | | | | To Do Business in Florida a 2020 | | | | | | |
| Coral Gables, FL | | | , | | | | 5. FEI Number Applied For Not Applied For | | | | | | |
| 34 Country USA | | Zip | | Country | | 6. | | | 5 Addition | al Fee require | 8 | | |
| | | | 7. | Name and | Address of Curre | ent Register | ed Agent | | · · · · · · · · · · · · · · · · · · · | | _ | - | |
| Name | | CARLO | S J. V | | | • | | | | | | | |
| Street Address (P.O. Box Number is Not Acceptable) | | | | | | | | | | | | | |
| Suite, Apt. | #, Etc. | | | | | - | | | | | | | |
| City CORAL GABLES | | | | | | | | State Zip Code 33134 | | | | | |
| g appointed the | e registere | ed agent of the ab | ove named cor | poration, am | familiar with and | accept the ot | oligations of sec | tion 607.050 | 5 or 617.0503, F.S. | | | 10/02) | |
| Signature of Registered Agent | | | | | | | | | 10/8/01 | 3 | | CR2E081 (10/02) | |
| | | | EGISTERED A | GENT MUST | SIGN | | | | | | | ដូ | |
| | | | | | | | | <u> </u> | | | | - | |
| Officers and/or Directors | | | | | | | | | City / Stat | e / Zip | | | |
| LUIS | к. к | KORENFEL | D | | | e Leo | n Blvd. | Coral | Gables, | FL, | 33134 | | |
| JONATH | IAN K | KORENFEL | D . | 2100 | Ponce D | e Leo | n Blvd. | | | FL, | 33134 | | |
| YOEL K | OREN | NFELD | | | | e Leo | n Blvd. | | Gables, | FI., | 33134 | | |
| FERNAN | DO V | /ALDIVIE | so | 2100 318ui | Ponce D | e Leo | n Blvd. | Coral | Gables. | FL. | 33134 | l | |
| | | | | | | | | | | | | ĺ | |
| | | | | | • . | | | 1 | · . | | | | |
| einstatement ap by the corpora s application is | pplication, tion have true and a | the reason for dis been paid and the accurate, and my | solution has be names of indiv signature shall | en eliminated iduals listed o nave the sam | , the corporate na on this form do no e legal effect as if | me satisfies t qualify for a made under | the requirement in exemption un | ts of section 6 der section 1 $\frac{1800}{2}$ | 307.0401 or 617.04 19.07(3)(1), F.S. Th | 01, F.S., the information | at all fees on indicated | | |
| | PONCE #, etc. e 600 ite I Gable Vite A Name Street Add Suite, Apt. City g appointed the of d Agent EXERNAN FERNAN fy that I am an ainstatement ap by appointed is s application is | pal Office Address Ponce De #, etc. e 600 Ite I Gables, Name Street Address (P.C. Suite, Apt. #, Etc. City g appointed the register of d Agent ES and Street Addresses Officer LUIS K. H YOEL KOREN FERNANDO I FERNANDO I Ty that I am an officer or an instatement application, by the corporation have s application is true and | CUMENT # OQ OOC Oration Name LYEKO CORPORATION Pal Office Address Ponce De Leon Blv #, etc. e 600 Ite Gables, FL Country USA Name CARLO Street Address (P.O. Box Number is to 2100 Suite, Apt. #, Etc. City CORAL Gappointed the registered agent of the second of Agent Es and Street Addresses of Each Officer and Officers and/or Directors LUIS K. KORENFEL JONATHAN KORENFEL YOEL KORENFELD FERNANDO VALDIVIE Ty that I am an officer or director or the receptionstatement application, the reason for displaying the corporation have been paid and the samplication is true and accurate or in the samplication is true and acc | PRPORATION INSTATEMENT CUMENT # PO2 0000196 Paration Name LYEKO CORPORATION Pal Office Address PONCE DE LEON BLVC. #, etc. E 600 Ite Gables, FL Country USA CARLOS J. V Street Address (P.O. Box Number is Not Acceptable, 2100 PONCE Suite, Apt. #, Etc. SUITE 600 City CORAL GABLE. G appointed the registered agent of the above named corror of dagent REGISTERED A REGISTERED A TO Officers and/or Director (F Name of Officers and/or Director (F Name of Officers and/or Director (F Name of Officers and (F) Director (F) TO OFFI AND ON THE LD YOEL KORENFELD TO THE TOTAL OF THE PROPERTY OF TH | STREET Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. Suite, Apt. #, Etc. | FLORIDA DEPARTMENT OF Secretary of State DIVISION OF CORPORATIONS CUMENT # PO2 000019240 PAGENTAL | FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS FUMENT # PO2 000019240 FUMENT # PUMPNT # | FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS SUMENT # PO2 000019040 LYEKO CORPORATION 3. Mailing Office Address PONCE DE Leon Blvd. 4. Date Inc. 6600 16 Gables, FL Country COUNTY LYEKO COUNTY LYEKO CORPORATION Suite, Apt. #, etc. 6600 17 Country COUNTY COUNTY COUNTY COUNTY ANAME CARLOS J. VILLANUEVA, ESQ. Streat Address (P.O. Box Number is Not Acceptable) 2100 PONCE DE LEON BLVD. Suite, Apt. #, Etc. SUITE 600 City CORAL GABLES g appointed the registered agent of the recover and/or Director (Plotida nonprofit corporations must list at least 3 directors) Registered Address of Each Officer and/or Director (Plotida nonprofit corporations must list at least 3 directors) Name of Officer and/or Directors Officer and/or Director Officer and/or Director Officer and/or Director LUIS K. KORENFELD 2100 PONCE DE Leon Blvd. Suite 600 JONATHAN KORENFELD 2100 PONCE DE Leon Blvd. Suite 600 FERNANDO VALDIVIESO Pythat I am an officer or director or the receiver or trustee empowered to execute this application as provided for in crientstatement application, have been paid at the names of individuals listed on this form do not qualify for an exemption on a population is true and accurate and in populations and provided for in crientstatement application, the reason for dissolution has been eliminated, the corporate name satisfies his requirement as provided for in crientstatement application have been paid at the names of individuals listed on this form do not qualify for an exemption on a provided for in crientstatement application have been paid at the names of individuals listed and sulfily for an exemption on a provided for in crientstatement application is true and accurate and the names of individuals listed on this form do not qualify for an exemption on a provided for in crientstatement application is true and accurate and the names of individuals listed on this form do not qualify for an exemption on a provided for in crientstatement application is true and acc | FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS SUMENT # POQ 000019240 LYEKO CORPORATION 3. Mailing Office Address PONCE DE LEON BLVd. 4. Date incorporated or 7 To Do Business in Fig. 5. FEI Number 03 – 04 239 5 6. CERTIFICATE OF STATUL Name CARLOS J. VILLANUEVA, ESQ. Street Address (P.O. Box Number is Not Acceptable) 2100 PONCE DE LEON BLVD. Suite, Apt. #, Etc. SUITE 600 City CORAL GABLES G appointed the registered agent of the boxen named corporation, am familiar with and accept the obligations of section 607.050 of Agent REGISTERED AGENT MUST SIGN Date AS and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must fist al least 3 directors) Name REGISTERED AGENT MUST SIGN Date Officers and/or Directors 100 Ponce De Leon Blvd. Suite, 600 2100 Ponce De Leon Blvd. Suite 600 FERNANDO VALDIVIESO 2100 Ponce De Leon Blvd. Suite 600 FERNANDO VALDIVIESO 2100 Ponce De Leon Blvd. Suite 600 FERNANDO VALDIVIESO 2100 Ponce De Leon Blvd. Coral Suite 600 FERNANDO VALDIVIESO 2100 Ponce De Leon Blvd. Suite 600 FERNANDO VALDIVIESO 2100 Ponce De Leon Blvd. Coral Suite 600 FERNANDO VALDIVIESO 2100 Ponce De Leon Blvd. Coral Suite 600 FERNANDO VALDIVIESO 2100 Ponce De Leon Blvd. Coral Suite 600 FERNANDO VALDIVIESO 2100 Ponce De Leon Blvd. Coral Suite 600 FERNANDO VALDIVIESO 2100 Ponce De Leon Blvd. Coral Suite 600 FERNANDO VALDIVIESO 2100 Ponce De Leon Blvd. Coral Suite 600 FERNANDO VALDIVIESO 2100 Ponce De Leon Blvd. Coral Suite 600 FERNANDO VALDIVIESO 2100 Ponce De Leon Blvd. Coral Suite 600 FERNANDO VALDIVIESO 2100 Ponce De Leon Blvd. Coral | FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS SUMMENT # PO2 000019840 A Mailing Office Address PONCE DE Leon Blvd. A, stic. Sullie, Apt. F, etc. 600 City S. Suste 7. Name and Address of Current Regislatered Agent Name CARLOS J. VILLANUEVA, ESQ. Silveol Address (P.O. Box Number is Not Acceptable) 2100 PONCE DE LEON BLVD. Sullie, Apt. F, etc. Sullie, Apt. F, etc. CORAL GABLES FL Sullie, Apt. F, etc. Sullie, Apt. F, etc. 15. FEI Number 03-0423957 6. CERTIFICATE OF STATUS DESIRED Name CARLOS J. VILLANUEVA, ESQ. Silveol Address (P.O. Box Number is Not Acceptable) 2100 PONCE DE LEON BLVD. Sullie, Apt. F, etc. Sullie, Apt. F, etc. Sullie, Apt. F, etc. FL Sullie, Apt. F, etc. Sullie, Apt. F, | FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS CUMMENT # POQ DODO! 9040 CUMENT # POQ POQ POQ DODO! 9040 CUMENT # POQ POQ POQ DODO! 9040 CUMENT # POQ | FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS SUMMENT # POQ 000001 9340 LYEKO CORPORATION 3. Maining Office Address POINCE DE Leon Blvd. LYEKO CORPORATION 4. Date incorporation of Confided To De Business an Florida To De Business and Florida To De Business an Florida To De Business an Florida To De Business and Florida To De Busi | |

Law Offices of Carlos J. Villanueva, P.A.

Attorney at Law 2100 Ponce De Leon Blvd., Suite 600 Coral Gables, Florida 33134

Telephone: (305) 377-0812 Facsimile: (305) 377-8848 E-mail address: cvillanueva@unaley.com

Website: www.unaley.com

FACSIMILE

TO:

Attn: Eula

COMPANY:

Division of Corporations

FAX NO.:

1-850-245-6017

FROM:

Vivian Villatoro, Legal Assistant

RE:

Klyeko Corp., a Florida corporation Koitzi Corp., a Florida corporation

DATE:

October 9, 2003

NUMBER OF PAGES INCLUDING COVER: One (1)

Eula, please note that for the above-mentioned corporations our office never received the letters dated May 19, 2002 stating that the annual corporate renewal forms were being rejected due to missing FEI numbers.

The information contained in this transmission may be ATTORNEY PRIVILEGED AND CONFIDENTIAL. It is intended for the used of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying, of this communication may be strictly prohibited by law. If you have received this communication in error, please notify us immediately by telephone, and return the original message to us at the above address via the U.S. Postal Service. We will reimburse you for the postage. Thank you.

Law Offices of Carlos J. Villanueva, P.A.

Attorney at Law 2100 Ponce De Leon Blvd., Suite 600 Coral Gables, Florida 33134

Telephone: (305) 377-0812 Facsimile: (305) 377-8848

E-mail address: cvillanucva@unaley.com

Website: www.unaley.com

October 8, 2003

Department of State
Division of Corporations
2805 Little Deal Road
Tallahassee, Florida 32308

Re: Corporate Reinstatement

Dear Sir or Madam:

Please be advised that our office submitted the annual corporate fees on April 2003. The two were returned to us due to missing the FEI numbers. Per your request enclosed the corporate reinstatement form for each corporation. Please note that our office has confirmed that the \$150.00 annual fee was kept at your office for each corporation. Therefore, please update your records accordingly.

If you should have any questions, please do not hesitate to contact our office.

Sincerely,

Vivian Villatoro Legal Assistant