

APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P02000070045

1. Corporation Name

GUSTAVO DE ZENDEGUI, P.A.

FILED
06 JAN -6 PM 3:50SECRET
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-06

Principal Place of Business		Mailing Address		3. Date Incorporated or Qualified 06/25/2002	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address	4. FEI Number 30-0094364	Applied For Not Applicable		
21 201 Alhambra Cir., Ste 702	26 201 Alhambra Cir., Ste 702	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees			
22	27	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
City & State	City & State				
23 Coral Gables FL	28 Coral Gables FL				
Zip	County	Zip	County		
24 33134	25 Miami-Dade	29 33134	30 Miami-Dade		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name Gustavo De Zendegui
82 Street Address (P.O. Box Number is Not Acceptable) 201 Alhambra Cir., Ste 702
83
84 City Coral Gables
FL 85 Zip Code 33134

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.

SIGNATURE

Gustavo De Zendegui by T. Baez as attorney-in-fact 1/5/2006

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Gustavo De Zendegui 201 Alhambra Cir., Ste 702 Coral Gables, FL 33134 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 200063983072 01/18/06--01079--008 **\$600.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 an attachment with an address.

SIGNATURE

Gustavo De Zendegui by T. Baez as attorney-in-fact 1/5/2006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2082

Florida Department of State
Division of Corporation
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Re: GUSTAVO DE ZENDEGUI, P.A.

Enclosed are the following:

1. Uniform Business Report for the company referenced above.
2. \$600 check payable to Florida Department of State

We never received the Uniform Business Report for the following year(s) that should have been mailed to us:

2003, 2004, 2005 and 2006

Please waive the late filing fee and treat the company as never being administratively dissolved. Thank you.

By: 

by T. Baez as attorney-in-fact

Name: Gustavo De Zendegui

Title: Director

Date: 1/5/06