PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT FLORIDA DEPARTMENT OF STATE Secretary of State Division of corporations				FILED
				03 OCT 27 PH 2: 35
DOCUMENT # P02000072077 1. Corporation Name				SECRETARY OF STATE TALLAHASSEE. FLORIDA
AMC	G IMPORT-EXPORT CO	RPORATION.		
	al Office Address SW 158TH AVE	3. Mailing Office Address	ss	REINSTATEMENTO
Suite Apt. #	i, etc.	Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida 07/01/2002
City & State PEMBROKE PINES FL		City & State		5. FEI Number Applied For 41-2048492 Not Applied by
^{Ζեր} 33027	Country USA	Zip	Country	CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent Name				
	ARTURO GONZALEZ			
	Street Address (P.O. Box Number is Not Acceptable) 1082 SW 158TH AVENUE 400024164654			
	Suite, Apt. #, Etc. 10/27/0301049017 **150 00			
	City PEMBROKE PINES.			State Zip Code FL 33027
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				
Registered /		GISTERED AGENT MUST	SIGN	Date
9. Names	and Street Addresses of Each Officer and	Vor Director (Florida nonpro	ofit corporations must list at le	≑ast 3 directors)
Titles	Name of Street Address of Ea Officers and/or Directors Officer and/or Direct			
P.D.	ARTURO GONZALEZ.	1082 S	W 158TH AVENUE,	, PEMBROKE PINES, FL. 33027
	with the same at the same of the same of	·- ·		
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 fitting 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: 954-442-4512 SIGNATURE SIGNATURE NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phone #				
	SIGNATIONE AND THE PORTE	A I EU MANNE UT SRAUMS OFF	NEK UKECTUR	Date Daytime Phone #

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AMG IMPORT-EXPORT CORPORATION. 1082 SW 158TH AVENUE PEMBROKE PINES, FL. 33027

Miami Florida

October 24, 2003

Florida Department of State _Division_of Corporation. P. O. Box 6327 Tallahassee, Fl. 32314

Re: 2003 Uniform Business Report Corporate #P02000072077 AMG IMPORT-EXPORT CORPORATION.

Dear Sir;

Enclosed please find 2003 UNIFORM BUSINESS REPORT for the annual Corporate Report. Enclosed is my ck. # 1128 for the amount of \$150.00, to paid the above Annual fee and for year 2003.

Please accept this payment, because we do not have any knowledge about the existence of such fees, and I never get any notice for the first or second notice. I will make sure that this fee in the future this will be paid on time.

If you need any more information please do not hesitate to contact me.

Sincerely yours,

AMG IMPORT-EXPORT CORPORATION.

esident.