2005 FOR PROFIT CORPORATION REINSTATEMENT

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DOCUMENT # P02000086463								FH	<i>-</i> 11		
1. Entity Name ARAUZ INTERNATIONAL, INC.								1 11	. 0		
ANOZ INI ENIATIONAL, INC.							05	0: 130	Pil I: C)9	
Principal Ptace of Business Mailing Address							000	1		-	
9952 SW 8TH ST #124 9952 SW 8TH ST #124 MIAMI, FL 33174 MIAMI, FL 33174			4				ĭ∴' L	APT 34		,	
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Principal Place of Business 3. Mailing Address											
15571 au 59 ⁴¹ ST. Suite, Apt. #, etc. Suite, Apt. #, etc.						40070005	25				
						10072005	REIN-P		E098 (6/04)	-lied For	
	smi FL	City & State	•			4. FEI Number Applied For 82-0558173 Not Applicable					
Zip 331°	Country Country	Zip Country				5. Certificate of Status Desired See Required Fee Required					
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent							
ARAUZ, RAFAEL O					Name .						
9952 SW 8TH ST #124 MIAMI, FL 33174				Street Address (P.O. Box Number is Not Acceptable)							
	,			City					Zip Code		
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered penul											
SIGNATURE SIGNATURE											
Signature Appet or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE											
FILE NOWIII FEE IS \$150.00 After January 1, 2006, Fee will be \$300.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.								F.S., the notice.			
10.	OFFICERS AND	DIRECTORS	11.			ADDITIONS,	CHANGES TO	OFFICERS AN	ND DIRECTORS	S IN 11	
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12. I 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 report or supplemental 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 trusted employers because this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an appears in Block 10 or Block 11 if											
SIGNATURE: SIGNATURE OF SIGNAT											