

1072

APPROVED
AND
FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

06 APR 24 PM 4:43

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000106443

1. Corporation Name

Group Italia 3708 Corp.

400074343494
05/10/06--01026--024 **600.00

REINSTATEMENT

03-06 *ISC*

CR2E081 (12/05)

2. Principal Office Address
2940 SW 30 Avenue

3. Mailing Office Address

Suite, Apt. #, etc.
Suite 5

Suite, Apt. #, etc.

City & State
Hallandale, FL

City & State

Zip
33009

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/02/2002

5. FEI Number

Applied For

☒ Applied For
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

§ 375 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Patrick R. Moyal

Street Address (P.O. Box Number is Not Acceptable)
208 North University Drive

Suite, Apt. #, Etc.

City
Pembroke Pines

State Zip Code
FL 33024

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 *Patrick R. Moyal*
REGISTERED AGENT MUST SIGN

Date *3/30/06*

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
Pres	Moshe Amsellem	18911 Collins Avenue, Unit 2303	Sunny Isles Beach, FL 33160

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 contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as made under oath.

SIGNATURE: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/06 *305-950-7727*
Date Daytime Phone #

292

March 29, 2006

Via US Mail

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

STATEMENT OF NON-RECEIPT OF ANNUAL REPORT NOTICES

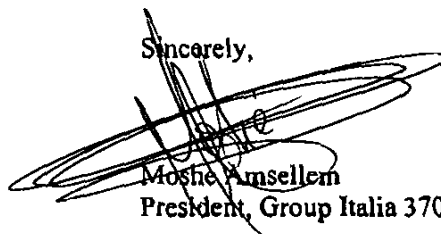
To Whom It May Concern:

This letter is to certify that Group Italia 3708 Corp. did not receive the annual report notices in 2003, the year of dissolution.

Accordingly, please waive the reinstatement fee. Annual Report Fees and Corporate Supplemental Fees for the years 2003 through 2006 accompany the attached Application for Reinstatement.

Thank you for your attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Moshe Amsellem", is written over a large, loopy, circular scribble.

Moshe Amsellem
President, Group Italia 3708 Corp.