


**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

<b>DOCUMENT #</b> P02000118036	
<b>1. Entity Name</b> Terra Brazil Fashion, Inc.	

**FILED** 1472  
07 APR -5 AM 11:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**REINSTATEMENT**

<b>2. Principal Place of Business</b> 3304 Virginia St Suite, Apt. #, etc. Apt 2A City & State Coconut Grove		<b>3. Mailing Address</b> 3304 Virginia St Suite, Apt. #, etc. City & State Coconut Grove		<b>4. FEI Number</b> 04-3721352	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>Zip</b> 33133	<b>Country</b> Miami Dade	<b>Zip</b> 33133	<b>Country</b> Miami-Dade	<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

06-07 ef  
DO NOT WRITE IN THIS SPACE  
06/09/06 90001 005 \$150.00

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IN THIS SPACE**

<b>7. Name and Address of Current Registered Agent</b>	
Name <b>Joao B Ferreira</b>	
Street Address (P.O. Box Number is Not Acceptable) <b>3304 Virginia St Apt 2A</b>	
City <b>Coconut Grove</b>	<b>FL</b> <b>Zip Code</b> <b>33133</b>

**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 agent.**

SIGNATURE Joao B Ferreira DATE 04/03/07  
(NOTE: Registered Agent signature required when reinstating)

<b>January 1 - May 1 Fee is \$150.00</b> <b>After May 1, Fee is \$550.00</b> <b>Amended UBR is \$61.25</b> <b>Make Check Payable to Florida Department of State</b>	<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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<b>10. OFFICERS AND DIRECTORS</b>			
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>Joao B Ferreira / President</b> <b>3304 Virginia St Apt 2A</b> <b>Coconut Grove, FL 33133</b>	<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	<b>900096444299</b> <b>04/11/07--01020--001 **150.00</b>
<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>		<b>TITLE</b> <b>NAME</b> <b>STREET ADDRESS</b> <b>CITY-ST-ZIP</b>	
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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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.**

SIGNATURE: Joao B Ferreira DATE 04/03/07 PHONE (86) 355-0070  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

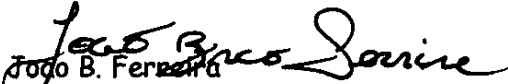
CR2E034B (12/02)

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TO: DIVISION OF CORPORATION  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

AS PER OUR PHONE CONVERSATION I AM SENDING TO YOU THIS LETTER OF EXPLANATION AND THE UBR FORM ALONG WITH A CHECK TO PROPERLY UPDATE CORPORATION I FURTHER STATE THAT I DID NOT HERE ANYTHING BACK FROM YOUR OFFICE REGARDING THE PRIOR REJECT IN JUNE OF 2006. I HAVE ATTACHED A COPY OF THE CANCELLED CHECK ALONG WITH THE PAYMENT FOR THE 2007 ANNUAL REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

CORDIALLY,

  
João B. Ferreira  
PRESIDENT