

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000119247 1. Entity Name: MIAMI BEST ATTRACTIONS, CORP.				<div style="font-size: 1.5em; margin-bottom: 10px;">192</div> <div style="font-size: 1.2em;">06 MAR 20 PM 2:00</div>	
Principal Place of Business 5445 COLLINS AVE. MIAMI, FL 33139		Mailing Address 1800 COLLINS AVE. APART. # 10-F MIAMI, FL 33139		<div style="font-size: 1.5em; margin-bottom: 10px;">REINSTATEMENT</div> <div style="font-size: 1.2em;">05-06</div>	
2. Principal Place of Business 3765 SW 50ST <small>Suite, Apt. #, etc.</small>		3. Mailing Address 3765 SW 50 ST <small>Suite, Apt. #, etc.</small>			
City & State HOLLYWOOD FL <small>Zip Country</small> 33312		City & State HOLLYWOOD, FL <small>Zip Country</small> 33312		4. FEI Number 82-0571219	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		Applied For <input type="checkbox"/> Not Applicable		2212006 REIN-P CR2E098 (11/05)	
6. Name and Address of Current Registered Agent MORREL, MARITZA 1800 COLLINS AVE APART # 10-F MIAMI, FL 33139			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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: <u><i>Maritza Morrel</i></u> <small>Signature typed or printed name of registered agent and title if applicable</small>		(NOTE: Registered Agent signature required when reinstating)		DATE: <u>03-03-06</u>	
FILE NOW!!! FEE IS \$300.00		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MORREL, MARITZA 1800 COLLINS AVE. APART # 10-F MIAMI BEACH, FL 33139 <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MORREL MARITZA 3765 SW 50 ST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	HOLLYWOOD, FL 33312 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u><i>Maritza Morrel</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		DATE: <u>03-03-06</u>		Daytime Phone #	

March 3, 2006

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Reinstatement Department
Division of Corporations
P.O. Box 6327
Tallahassee, Fl 32314

Subject: MIAMI BEST ATTRACTIONS, CORP
Re: Reinstatement Request

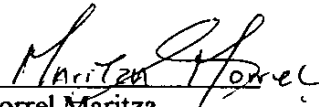
Dear Sirs:

The enclosed Reinstatement Form is attached duly signed by the president as well as the correction of box 2 and 3 of the Report. As per your instructions a payment for the amount of US \$300.00 is enclosed too, for the corresponding years 2005 and 2006 renewals.

Therefore, there is no balance due, and the reason why I haven't submit the corresponding renewal registration fee for the year 2005 it was because I haven't received the annual report on set address.

If further information is needed please do not hesitate to contact me at any time to the address shown on box 3 of the Annual Report Form. I request you accept my apology with all my respect. I remain,

Very truly yours,


Morrel Maritza

Enc.