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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	SECULTARY OF STATE TALLAHASSEE, FLORIDA		
DOCUMENT # PO 200 1. Corporation Name MOINNIS AUTO	orausal center, Inc.			
2. Principal Office Address 09545.W. 47 mg. Suite, Apt. #, etc.	3. Mailing Office Address UG54 5.W 47 34 Suite, Apt. #, etc.	400024339734 10/31/03-01075-014 #150.00 REMSTATEMENT 03		
City & State Miami, FL 33155 Zip Country 33155 USA	City & State Miami, FZ 33/55 Zip Country 33/55 USA	4. Date Incorporated or Qualified To Do Business in Florida 5. FEI Number Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status		
Name		tered Agent		
Signature of Registered Agent	ove named compration, am familiar with and accept the	State Zip Code 33/55 State Zip Code 33/55 State 33/55 State		
9. Names and Street Addresses of Each Officer and Titles Name of Officers and/or Directors	nd/or Director (Florida nonprofit corporations must list a Street Address of E S Officer and/or Direct	ach City I State / 7 in		
	inado 1994 SW 4	That Micmi fl 33155		
President bilberto	lanades 169345.W.4	17"5+ MIami, PL 30199		
		Aulé		
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 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: SIGNATURE AND TYPEO ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date				

MARILYN CAPO, P.A. ATTORNEY AT LAW

TELEPHONE: (305)447-4676 FACSIMILE: (305)461-9881 5835 Blue Lagoon Drive Suite 200 Miami, FL. 33126

October 6, 2003

Department of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Re: Manny's Auto Center, Inc. .

Dear Sirs:

Enclosed please find Corporation Reinstatement Form for the for the above referenced corporation, along with check number 2422 in the amount of \$50 representing fee for same.

Awaiting your reply, I remain

Very truly yours,

Gloria Martinez, legal asst. for Marilyn Capo

Enclosures