CORPORATION REINSTATEMENT	Secretar	TMENT OF STATE y of State corporations		FILED 07 FEB - 1 PM 3: 19
DOCUMENT # \$\(\)300007/506				SECRETARY OF STATE TALL AHASSEE, FLORIDA
The FJP Hotel Group			90 02/06	00087496909 /0701041014 **600.00
235 S. Biscayne Blvd			REINSTATEMENT	
Suite, Apt. #, etc. 1007	Suite, Apt. #, etc. 1007		4. Date Incorporated or Qualified To Do Business in Florida June 24th 2003	
y & State Miami, Florida City & State Miami, Florida		5. FEI Number Applied For Not Applicable		
² 33131 ÜSA	Žij3131	USA	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent Frank Pena 335 South Biscayne Blvd \$1007. Etc. Miami State 33131			The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.	
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 Date REGISTERED AGENT MUST SIGN				
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)				
	Officers and/or Directors Office		dress of Each d/or Director City / State / Zip	
President Frank Pena	335	South Biscay	ne Blvd	Miami/Florida/33131
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 if made under oath. SIGNATURE: SIGNATURE: Date Daytime Phone #				

Group

January 31, 2006

State of Florida
Department of State
Division of Corporation
2661 Executive Center Circle
Tallahassee, Florida 32301

To Whom It May Concern:

Please accept my application of reinstatement of The FJP Hotel Group as a corporation in the State of Florida.

Please wave all reinstatement fees. Unfortunately, I never received any annual report notices in the year of dissolution/revocation. I appreciate your consideration in this matter. On April 26th I sent the attached letter with a check. The check was never cashed and according to your department it was sent back to my office. I never received it.

I have enclosed a \$600.00 check for reinstatement.

If I can be of any further assistance please do not hesitate to contact me at (305)761-6653.

Thank you,

Frank Pena President

The FJP Hotel Group



April 26, 2006

State of Florida
Department of State
Division of Corporation
2661 Executive Center Circle
Tallahassee, Florida 32301

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Please wave all reinstatement fees. Unfortunately, I never received any annual report notices in the year of dissolution/revocation. I appreciate your consideration in this matter.

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Thank you,

Frank Pena President The FJP Hotel Group