

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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FILED
05 DEC -5 AM 8:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P03000102461

1. Corporation Name

cu Consultants, Inc

2. Principal Office Address

1111 Brickell Bay Dr 503

Suite, Apt. #, etc.

City & State

Miami FL

Zip

33131

Country

EEUU

3. Mailing Office Address

1111 Brickell Bay Dr.

Suite, Apt. #, etc.

503

City & State

Miami, FL

Zip

33131

Country

EEUU

REINSTATEMENT

04-05

**4. Date Incorporated or Qualified
To Do Business in Florida**

09/18/03

5. FEI Number

571186662

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Carlos Alfonso Uribe

Street Address (P.O. Box Number is Not Acceptable)

1111 Brickell Bay Dr.

Suite, Apt. #, Etc.

503

City

Miami

300061623223

11/22/05--01042--010 **300.10

State

FL

Zip Code

33131

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

REGISTERED AGENT MUST SIGN

Date

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
PRST	Carlos A. Uribe	1111 Brickell Bay Dr #503	Miami, FL 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 under section 119.07(3)(l), 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:

Carlos Alfonso Uribe

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/15/05

Date

786 208-7604

Daytime Phone #

CR2E081 (10/02)

2082

**DIVISION OF CORPORATIONS
ANNUAL REPORT OR REINSTATEMENT
CU CONSULTANTS
DOCUMENT # P03000102461**

November 15, 2005


To Whom It May Concern:

I am writing this letter to explain the reason why I did not file the annual report, For the year 2005, I never received the letter for the renewal. I was expecting for the Letter and never got on my mail for this reason I am writing this letter to consider this inconvenience and renew it without any late fee. I am enclosing \$300.00 dollars for 2004-2005.

I feel sorry for any inconvenience.

If you have any question do not hesitate to contact me at (786)208-7604

Sincerely,


**CARLOS A. URIBE
REGISTERED AGENT**