- PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| FLORIDA DEPARTMENT OF STATE | | FILED |
|--|---------------------------------|---|
| CORPORATION REINSTATEMENT | Secretary of State | 07 FEB -6 AM 8: 40 |
| Co visit | DIVISION OF CORPORATIONS | SECRETARY OF STATE |
| | 0055770 | SECREIARY OF STATE FALLAHASSEE, FLURIDA |
| First American Commercial Enterprises, INC | | 800088068308 02/13/0701013005 **458.75 |
| 2. Principal Office Address | 3. Mailing Office Address | |
| 1711 Carinth Ave | 1711 Coruth Ave | REINS I A P. 12/05) 07 |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | 1.00 |
| Sp308 | 5fe 308 | 4. Date Incorporated or Qualified To Do Business in Florida 200 |
| city & State Los Angeles CA | Los Augeles, CH | 5. FEI Number Applied For Not Applied For Not Applied For |
| 2ip Country 90025 USA | Zip Country | 6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status |
| 7. Name and Address of Current Registered Agent | | |
| Name | | |
| Street Address (P.O. Brox Number is Not Acceptable) | | |
| Suite, Apt. #, Etc. Suite, Apt. #, Etc. | | |
| Surve 105 | | |
| Largo State Zip Code FL 33770 | | |
| 8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 507.0505 or 617.0503, F.S. | | |
| Signature of Registered Agent MUST SIGN Date 1. 29. 07 | | |
| 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 Addres Officer and/or | |
| Pres Alan Rame | 1711 Pour | 144 Ave #300 LA . CH 90028 |
| Treas Alan Remer 1711 Corinth Avetica LA CH GOODS | | |
| Sec Alan Rumer 1711 Corinth Another LA, CH 90025 | | |
| | | |
| | | |
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| | | |
| 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICEROR DIRECTOR Date Date Description of Signing Officeror Director Date Description of Signing Officeror Director Date Description of Signing Officeror Director Description of Signing Officeror Director Description of Signing Officeror Director Director Date Description of Signing Officeror Director Directo | | |
| 3 year D- Send 450 loo + 8.25 = \$458.75 | | |

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

January 1, 2007

Dear Department of Corporations:

Recently I learned the notices sent to my company for the annual corporate fee were returned to your offices. In speaking to one of your service representatives I was told how much to submit in order to bring my corporation current.

I am therefore tendering payment in the form of a check for the past 2 years (05 and 06) \$300.00 the current year (07) \$150.00 and \$8.75 for a Certificate of Status for a total of \$458.75 to bring my corporation current.

Thank you,

Alan Ramer, President
First American Commercial Enterprise
1711 Corinth Avenue
Suite 308
Los Angeles, CA 90025
323 793 9222