

2006 FOR PROFIT CORPORATION REINSTATEMENT

1 of 2

FILED


06 NOV 13 05:51

SEC. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

[Handwritten signature]



REINSTATEMENT 2006
11072006 REIN-P CR2E098 (11/05) WOP

DOCUMENT # P04000091869					
1. Entity Name TAINME S.A. INC					
Principal Place of Business 19307 S.W. 65TH ST. PEMBROKE PINES, FL 33332			Mailing Address 19307 S.W. 65TH ST. PEMBROKE PINES, FL 33332		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-1251566	
				Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
QUINTANA, JUAN 19307 S.W. 65TH ST. PEMBROKE PINES, FL 33332			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 <i>[Signature]</i> Nov/07/06 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE					
FILE NOW!!! FEE IS \$150.00 After January 1, 2007, Fee will be \$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 QUINTANA, JUAN 19307 S.W. 65TH ST. PEMBROKE PINES, FL 33332 <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	TD SUAREZ, LIDIA 19307 S.W. 65TH ST. PEMBROKE PINES, FL 33332 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	300081737803 11/13/06--01038--010 **158.75		
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: <i>[Signature]</i> Nov/07/06 (954) 689-0362 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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November 7, 2006

Department of State
Division of Corporation.
P.O.BOX 6327
Tallahassee, Fl. 32314

**SUBJECT 2,006 ANNUAL REPORT
TAINME S.A. INC
19307 S W 65 ST
PEMBROKE PINES, FL 33332**

Document # P 04000091869

We would like to inform the Department of Corporation that we have not received in time the
ANNUAL REPORT NOTICE to update our corporation for the years 2,006. The address
is not the same

We are requesting any waiver of penalties or interests and your deep understanding. Our
Accountant question us about it and advise to explain as soon as posible the missing
documents 2,006 Annual Report) .

We need your support and understanding. Thanks

Sincerely,

X 