PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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| CORPORATION REINSTATEMENT | Secretar | TMENT OF STATE by of State corporations | | | 06 MAR 27 | AM 9: 28 | |
|---|--|--|------------------------|---|----------------------|--|--|
| DOCUMENT # P04000121758 1. Corporation Name | | | - | | TALL AREAS | E, FLORIDA | |
| Lujusan Estates Corporation | | | | | a version and the | 53 | |
| 2. Principal Office Address 2100 Ponce de Leon Blvd 2100 Po | | ffice Address Once de Leon Blvd | | ٠. ٠ | CR2E081 (12/05) | 05-06 | |
| Suite, Apt. #, etc. Suite, Apt. #, 600 | | 4. D | | Date Incorporated or Qualified To Do Business in Florida 08-23,2004 | | | |
| Coral Gables | Coral Gable | | | 20-1534777 Applied For Not Applicable | | | |
| ්33134 | ^{Zip} 3134 | ÛŜĀ | 6. | | | | |
| | 7. Name and | Address of Current Registe | ered Agent | | | | |
| Name Carlos J. Villanueva, Esq. | | | | | | | |
| Street Address (R.O. Box Number is No. 2100 Ponce de | e Leon Blvd. | | | | | | |
| Suite, Apt. #, Etc. 600 | | | | | | | |
| city Coral Gables | | | | State FL | 33134 | ······································ | |
| 8. I, being appointed the registered agent of the abo | ove named corporation, am | familiar with and accept the | obligations of section | on 607.050 | 95 or 617.0503, F.S. | " | |
| Signature of Registered Agent Date 3-24-01 | | | | | | | |
| Names and Street Addresses of Each Officer an | EGISTERED AGENT MUS | | 150 | - | | | |
| Titles Officers and/or Directors | | Street Address of Each Officer and/or Director | | City / State / Zip | | | |
| P/D Gonzado Tirado | Gonzado Tirado 2100 Ponce de Leon | | | Blvd #600 Coral Gables, Fl 33134 | | | |
| S Carlos J. Villanuev | Carlos J. Villanueva 2100 Ponce de Loean | | | Blvd #600 Coral Gables, FI 33134 | | | |
| | | 13/2 | | | 695492 | | |
| | | 11/2 | 04,/0! | /86 | 01042-012- | **300.00 | |
| | | | | | | | |
| 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 filling 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 fisted 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. CRILIDIAT. VILLANUEVA, SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # | | | | | | | |

Law Offices of Carlos J. Villanueva, P.A.

Attorneys at Law 2100 Ponce De Leon Boulevard, Suite 600 Coral Gables, Florida 33134

Telephone: 305.377.0812 Facsimile: 305.377.8848 E-mail Address: cvillanueva@unaley.com

Website: www.unaley.com

Mar. 24, 2006

Dept. of State
Division of Corporations
Reinstatement Division
P.O. Box 6327
Tallahassee, Florida 32314

Re: Document No. P04000121758

Dear Sir/Madam:

I enclose a check for \$300.00 for the 2005 renewal and 2006 renewal for Lujusan Estates Corporation. The annual report form for 2005 was not received. I also enclose the reinstatement form duly completed.

Please process this reinstatement as soon as you can.

Thank you for your courtesies.

Sincerely,

Carlos J. Villanueva