## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| Zip Country USA 33156 USA 33156 USA  7. Name and Address of Current Registered Agent  PATRICIO CERVANTES Street Address (P.O. Box Number is Not Acceptable) 9840 S.W. 77TH AVE.  Step Country USA  6. CERTIFICATE OF STATUS DESIRED St.75 Additional Fear for a Certificate of St.75 Additi | CORPORATION REINSTATEMENT  | Secretary of State   |   |  | FILED 10 MAY -6 AM 8: 33                                     |   |   |
|--|--|--|---|--|--|---|---|
| 2. Principal Office Address - No P.O. Box # 3. Mailing Office Address   9840 S.W. 77TH AVE.   Suite, Apt. #. etc.   SUITE 301   City & State   MIAMI, FL   Zip   | DOCUMENT#  |  |   |  | TALLAHASSEE, F   | STATE<br>LURIDA   |   |
| Sulle, Apt. 8, etc.  Sulle, Apt. 9, etc.  In Deale incorporated or Qualified To Do Business in Florida 12//28/2004  4. Date incorporated or Qualified To Do Business in Florida 12//28/2004  5. FEI Number 20-2176507   Applied To Do Business in Florida 12//28/2004  7. Name and Address of Current Registered Agent USA  7. Name and Address of Current Registered Agent USA  Streen Address (P.O. Box Number is Not Acceptable)  98.40 S.W. 77TH AVE.  Sulle, Apt. 9, etc.  Sulle,  | RAPEL, INC.  |  |   |  |  |   |   |
| 9840 S.W. 77TH AVE. 9840 S.W. 77TH AVE. Suite, Apt. 4, etc. SUITE 301  City 4 State City 4 State MIAMI, FL  Zip 33156  Country 33156  Country City A State  To Country Country City A State  To Country City A State  PARTICIO CERVANTES Site Act Acceptable)  9840 S.W. 77TH AVE Suite, Apt. 4. Etc. SUITE 301  City MIAMI  8. I. being appointed the registered agent a the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.  Signature of Registered Agent Must Sign  PARTICIO CERVANTES  Signature of Registered Agent Must Sign  PARTICIO CERVANTES  PROFIT CORPORATIONS ONLY The \$600.00 or oin statement fee is imposed. except in circumstances which the entity of this box, you are certifying the prior notices were notices and not private not  | 2 Oringinal Office Address No P.O. Po  | # 3 Mailing O  | ffice Address   |  | 601  | 01805009:   | 06<br>** 450.00                         |
| Sulte, Apt. 4, etc.  SUITE 301  City & State  MIAMI, FL  Zip  Country  33156  VSA  Name and Address of Current Registered Agent  Neme  PATRICIO CERVANTES  Suite, Apt. 4, Etc.  SUITE 301  City  State  VSA  State  VSA  State  VSA  PROFIT CORPORATIONS ONLY  Applied Not Agent  Not applied in or a Country  Street Address (P.O. Box Number is Not Acceptable)  9840 S.W. 77TH AVE.  SUITE 301  8. 1. being appointed the registered agent the above named corporation, and familiar with and accept the obligations of section 697.0505 or 617.0503, F.S.  Signature of Registered Agent  REGISTERED AGENT MUST SIGN  PATRICIO CERVANTES  Signature of Registered Agent  REGISTERED AGENT MUST SIGN  PATRICIO CERVANTES  9840 S.W. 77TH AVE., SUITE 301  MIAMI, FL 33156  Signature of Registered Agent Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  Titles  MARIA E. CERVANTES  9840 S.W. 77TH AVE., SUITE 301  MIAMI, FL 33156  MARIA E. CERVANTES  9840 S.W. 77TH AVE., SUITE 301  MIAMI, FL 33156  MARIA E. CERVANTES  9840 S.W. 77TH AVE., SUITE 301  MIAMI, FL 33156  Name of Officers and/or Directors of the receiver of trustee empowered to execute this application as provided for indrate 807 of 17 F.S. Intra-profify that for the propropate mentionate the requirements of section 807 0407 of 17 F.S. Intra-profify that for the propropate mentionate the requirements of section 807 0407 of 17 F.S. Intra-profify that for the propropate mentionate the requirements of section 807 0407 of 17 F.S. Intra-profify that for the propropate manus address the requirements of section 807 0407 of 17 F.S. Intra-profify that for the propropate manus address the requirements of section 807 0407 of 17 F.S. Intra-profify that for the propropate manus address the requirements of section 807 0407 of 17 F.S. Intra-profify that for the propropate manus address the requirements of section 807 0407 of 17 F.S. Intra-profify that for the propropate manus address the requirements of section 807 0401 of 17 0401, F.S. Intra-pro |  |  |   |  | DEIN   |   |   |
| To Do Business in Florida   12//28/2004  |  |  |   |  | MEIN   |   | 00-10                                   |
| City & State  MIAMI, FL  Zip  33156  Country  USA  Zip  Country  33156  Country  Cou | SUITE 301  |  | SUITE 301   |  |  | ace in Florida  |   |
| MIAMI, FL  Zip 33156  USA  Zip 33156  USA  Recording to Country 33156  USA  Recording to Country 33156  To Name and Address of Current Registered Agant  Name PATRICIO CERVANTES Suite, Apt. #, Etc. SuITE 301  City MIAMI  8. I, being appointed the registered Agent Registered Age  | City & State City & Sta  |  | ·   |  |  | 12//28  | <del></del>                             |
| 33156 USA  33156 USA  33156 USA  33156 USA  33156 USA  CERTIFICATE OF STATUS DESIRED □ SPAS Additional Feet Profit Gentificate of Status Desired □ Spatial Status Desired □ Spasses Of Certification of Status Desired □ Spasses Of Certification of Status Desired □ Spasses Of Certification of Status Desired □ Spasses Of Desir  | MIAMI, FL  | MI   | MIAMI, FL   |  | 5. PELINUMBER  |   | Not Applicable                          |
| Name PATRICIO CERVANTES Street Address (P.O. Box Number is Not Acceptable) 9840 S.W. 77TH AVE. Sulte, Apt.#, Etc. SUITE 301 City MIAMI 8. I, being appointed the registered agent of the above named corporation, an familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent Registered Agent Registered Agent Officers and/or Directors  Titles Officers and/or Directors  9840 S.W. 77TH AVE., SUITE 301 MIAMI, FL 33156  S MARIA E. CERVANTES 9840 S.W. 77TH AVE., SUITE 301  MIAMI, FL 33156  10. E-mail Address:  To be used for future annual report notification) Trustee empowered to execute this applications or provided for in clapter 607 or 617, F.S. Huther certify that I am an officer or director or the receiver or trustee empowered to execute this applications approved for in clapter 607 or 617, F.S. Huther certify that I am an officer or director or the receiver or trustee empowered to execute this applications approved for in clapter 607 or 617, F.S. Huther certify that I am an officer or director or the receiver or trustee empowered to execute this applications are provided for in clapter 607 or 617, F.S. Huther certify that for this reinstatement and sequilements of section 607,0401 or 617,0401, F.S. that for this reinstatement and sequilements of section 607,0401 or 617,0401, F.S. that for this reinstatement and sequilements of section 607,0401 or 617,0401, F.S. that for this reinstatement and sequilements of section 607,0401 or 617,0401, F.S. that for this reinstatement and sequilements of section 607,0401 or 617,0401, F.S. that for this reinstatement and sequilements of section 607,0401 or 617,0401, F.S. that for this reinstatement and sequilements of section 607,0401 or 617,0401, F.S. that for this report and are provided for in clapter 607 or 617,0401 or 617,0401, F.S. that for this report and are provided for in clapter 607 or 617,0401 or 617,0401, F.S. that for this provided for in clapter 607 or 617,0401 or 617,0401, F.S. that for this provided for in clapter  |  | ,  | 1   | SA   |  |   |   |
| PATRICIO CERVANTES  Street Address (P.O. Box Number is Not Acceptable)  9840 S.W. 77TH AVE.  Suite, Apt. 8, Etc.  SUITE 301  City  MIAMI  8. 1, being appointed the registered agent of the above named corporation, and familiar with and accept the obligations of section 607 0505 or 617 0503, F.S.  Signature of Registered Agent  PATRICIO CERVANTES  9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  Titles  Officers and/or Directors  PATRICIO CERVANTES  9840 S.W. 77TH AVE., SUITE 301  MIAMI, FL 33156  S MARIA E. CERVANTES  9840 S.W. 77TH AVE., SUITE 301  MIAMI, FL 33156  10. E-mail Address:  The substantial main officer or director or the receiver or furstere empowered to execute this application as provided for in chapter 607 or 617, F.S. If further certify that affine this relinstratement and corporation be seen elemented, the corporation of the requirements of section 607 0401 or 617,0401, F.S. that the form his reinstatement and corporation of the receiver that the requirements of section 607 0401 or 617,0401, F.S. that the corporation cannot be seen elemented, the corporation are assistated the requirements of section 607 0401 or 617,0401, F.S. that the certify that the corporation cannot seen the requirements of section 607,0401 or 617,0401, F.S. that the corporation cannot seen the requirements of section 607,0401 or 617,0401, F.S. that the corporation cannot seen the requirements of section 607,0401 or 617,0401, F.S. that the corporation cannot seen the requirements of section 607,0401 or 617,0401, F.S. that the certify that the corporation cannot seen the requirements of section 607,0401 or 617,0401, F.S. that the certify that the corporation cannot seed the requirements of section 607,0401 or 617,0401, F.S. that the certified the certified the corporation cannot be considered to the certified the corporation of section 607,0401 or 617,0401, F.S. that the certified the corporation cannot cannot be calculated to the certified that t | 7. Name and a  | ROFIT CORPORATIONS C   | ONLY  |  |  |   |   |
| 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  9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  Tritles Officers end/or Directors Street Addresses of Each Officer and/or Director Officer and/ | PATRICIO CERVANTES. Street Address (P.O. Box Number is Not A 9840 S.W. 77TH AVE. Suite, Apt. #, Etc. SUITE 301       | State Zip Code   |   | [X] The \$600.00 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 |  |   |   |
| Signature of Registered Agent  REGISTERED AGENT MUST SIGN  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  D PATRICIO CERVANTES  9840 S.W. 77TH AVE., SUITE 301  MIAMI, FL 33156  S MARIA E. CERVANTES  9840 S.W. 77TH AVE., SUITE 301  MIAMI, FL 33156  MIAMI, FL 33156  10. E-mail Address: mccrvantes@gammahomes.com  (To be used for future annual report notification)  11. Learlify that I am an officer or director or the receiver of trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that 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 the corporate name satisfies the requirements of section 607 0401 or 617,0401, F.S. that   | •  | <b>FL</b>   33   | 156   |  |  |   |   |
| Titles Name of Officers and/or Directors Street Address of Each Officer and/or Director MIAMI, FL 33156  S MARIA E. CERVANTES 9840 S.W. 77TH AVE., SUITE 301 MIAMI, FL 33156  MIAMI, FL 33156  10. E-mail Address: mccrvantes@gammahomes.com  To be used for future annual report notification)  11. 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 filtred 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 a corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that a corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that a corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that a corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that a corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that a corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that a corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that a corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that a corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that a corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that a corporate name satisfies the requirements of section 607,0401 or 617,0401, F.S., that a corporate name satisfies the requirement and the corporate name satisfies the requirement  | Signature of   | P Ceu  | raut  | and accept the ob  | ligations of sectio  |   | 0, 2010                                 |
| D PATRICIO CERVANTES 9840 S.W. 77TH AVE., SUITE 301 MIAMI, FL 33156  S MARIA E. CERVANTES 9840 S.W. 77TH AVE., SUITE 301 MIAMI, FL 33156  In E-mail Address: mcervantes@gammahomes.com  To be used for future annual report notification  To be used for future annual report notification  To be used for future annual report notification as provided for in chapter 607 or 617. F.S. I further 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 I am an officer or director or the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that a corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., th | 9. Names and Street Addresses of Each  | Officer and/or Director (Flo                                 | rida nonprofit corporatio   | ons must list at lea   | st 3 directors)  |   |   |
| S MARIA E. CERVANTES 9840 S.W. 77TH AVE., SUITE 301 MIAMI, FL 33156  10. E-mail Address: mcervantes@gammahomes.com  (To be used for future annual report notification)  11. 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 the filtred 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 a composition is 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 a composition is reinstatement application.   |  |  |   |  |  | City / State / Zip  |   |
| 10. E-mail Address: mcervantes@gammahomes.com  To be used for future annual report notification)  11. 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 we filtred 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 is  | D PATRICIO CERV  | 9840 S.W. 77TH AVE., SUITE 301                               |   |  | MIAMI, FL 33156  |   |   |
| (To be used for future annual report notification)  11. 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 in 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 a   | S MARIA E. CERV.   | 9840 S.W. 77TH AVE., SUITE 301                               |   | TE 301   | MIAMI, FL 33156  |   |   |
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| SIGNATURE: APRIL 30, 2010  | filing this reinstatement application, the fees owed by the corporation have been as if made under oath.  SIGNATURE: | reason for dissolution has be paid. I furthe sertifu, the in | ee empowered to execute een eliminated, the corporation indicated on the corporation indicated in the corporation | cute this applicat<br>porate name satist<br>this application is  | ion as provided t<br>fies the requireme<br>true and accurate | nts of section 607,0401 or 617,0<br>, and my signature shall have the | 0401, F.S., that all                    |