
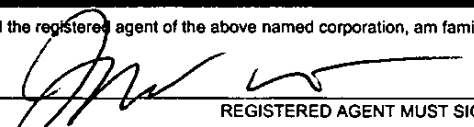
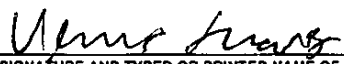


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>CORPORATION REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS</b>		<b>FILED</b>  <b>08 MAR -4 PM 12:01</b>  SECRETARY OF STATE TALLAHASSEE, FLORIDA																											
<b>DOCUMENT # P05000041144</b> <b>1. Corporation Name</b> <b>VENUS SUAREZ, P.A.</b>																															
<b>2. Principal Office Address - No P.O. Box #</b> <b>1689 ZENITH WAY</b> Suite, Apt. #, etc.		<b>3. Mailing Office Address</b> <b>1689 ZENITH WAY</b> Suite, Apt. #, etc.		<b>REINSTATEMENT 06-08<sup>KS</sup></b>																											
City & State <b>WESTON, FL</b>		City & State <b>WESTON, FL</b>																													
Zip <b>33327</b>	Country <b>USA</b>	Zip <b>33327</b>	Country <b>USA</b>																												
<b>4. Date Incorporated or Qualified To Do Business in Florida</b> <b>03/17/2005</b>		<b>5. FEI Number</b> <b>20-2511356</b> <div style="float: right;"> <input type="checkbox"/> Applied For  <input type="checkbox"/> Not Applicable         </div>																													
<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> <b>\$8.75 Additional Fee required for a Certificate of Status</b>				<input checked="" type="checkbox"/> The 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 the reinstatement fee be waived.																											
<b>7. Name and Address of Current Registered Agent</b> Name <b>JORGE L. GURIAN</b> Street Address (P.O. Box Number is Not Acceptable) <b>2600 Douglas Road</b> Suite, Apt. #, Etc. <b>Suite 1100</b> City <b>Coral Gables, FL</b> <div style="float: right;">         State  <b>FL</b>         Zip Code  <b>33134</b> </div>																															
<b>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.</b> Signature of Registered Agent  <span style="float: right;">Date <b>03/03/2008</b></span> <div style="text-align: center;">REGISTERED AGENT MUST SIGN</div>																															
<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Titles</th> <th style="width: 30%;">Name of Officers and/or Directors</th> <th style="width: 30%;">Street Address of Each Officer and/or Director</th> <th style="width: 30%;">City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>PD</td> <td>VENUS SUAREZ</td> <td>1689 ZENITH WAY</td> <td>WESTON, FL 33327</td> </tr> <tr> <td>SD</td> <td>JOSE LORENZO MOCCIA</td> <td>1689 ZENITH WAY</td> <td>WESTON, FL 33327</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>						Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip	PD	VENUS SUAREZ	1689 ZENITH WAY	WESTON, FL 33327	SD	JOSE LORENZO MOCCIA	1689 ZENITH WAY	WESTON, FL 33327														
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<b>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.</b>																															
<b>SIGNATURE:</b> 		<b>PRESIDENT</b>		<b>03/03/2008</b>																											
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone # <b>305-279-4101</b>																											

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 03/04/08--01025--005 \*\*450.00

## *Jorge L. Gurian, P.A.*

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March 3, 2008

Division of Corporations  
State of Florida  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Re: VENUS SUAREZ, P.A.. (P05000041144)

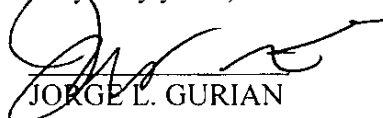
To Whom It May Concern:

Enclosed please find the Corporate Reinstatement Report for VENUS SUAREZ, P.A.. The annual Uniform Business Report had not been filed previously because the principal officer/ director had never received the renewal package during calendar year 2006 or 2007. Upon becoming informed of the need to file a Uniform Business Report, he of course was willing to comply with same and as such we provide the enclosed in conjunction with payment for the year 2006, 2007 & 2008.

We therefore respectfully request that you accept this filing as timely and classify the corporation as active and in accordance with the rules and regulations of the State of Florida. In addition, we have taken measures to ensure that this issue does not occur in subsequent years by correcting the address for the company and the registered agent information.

Thank you very much for your anticipated understanding and cooperation in this matter.

Very truly yours,



JORGE L. GURIAN



VENUS SUAREZ

Enclosure

2600 Douglas Road, Suite 1100, Coral Gables, FL. 33134  
Phone: (305) 279-4101 Fax: (305) 279-1489  
E-mail: [jgatlaw@aol.com](mailto:jgatlaw@aol.com)