

FOR PROFIT CORPORATION REINSTATEMENT

FILED

08 JUL 29 PM 2:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # <u>P05000078724</u>			
1. Entity Name <u>EXOTIC HILE, CO, INC</u>			
Principal Place of Business		Mailing Address	
2. Principal Place of Business <u>7066 NW 50 st</u>		3. Mailing Address <u>7066 NW 50 st</u>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <u>Miami, FL</u>		City & State <u>Miami, FL</u>	
Zip <u>33166</u>	Country <u>US</u>	Zip <u>33166</u>	Country <u>US</u>
4. FEI Number <u>20-3031081</u>		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
		Name <u>Martha O. Valencia</u>	
		Street Address (P.O. Box Number is Not Acceptable) <u>7066 NW 50 st</u>	
		City <u>Miami</u> FL Zip Code <u>33166</u>	
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 <u>Martha O. Valencia</u> <u>Martha O. Valencia</u> <u>7/23/08</u>			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>V-president</u> <u>Wall, Renan A</u> <u>7066 NW 50 st</u> <u>Miami FL 33166</u> ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>Valencia, Martha O.</u> <u>7066 NW 50 st</u> <u>Miami FL 33166</u> ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>President</u> <u>Bahamondez, Mauricio</u> <u>335 Ocean Dr, Apt #222</u> <u>Miami FL 33139</u> ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: <u>Martha O. Valencia</u> <u>Martha O. Valencia</u> <u>7/23/08</u> <u>639-3200</u>			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

REINSTATEMENT 06-08^{K5}
01172006 Chg-P CR2E001 (11/05)07/31/08--01003--013 **493.75
200133829062

07/31/08--01003--013 **493.75

(309)

EXOTIWINES, CORP
7066 NW 50 ST
MIAMI, FL 33166

July 23, 2008

To Whom It May Concern:

This is a brief letter stating that I did not receive any postcard or notice Reminding me of the Uniform Business Report of my company Exotiwines Corp. with Document # P05000078724. Along with this Business report for the years of 2006, 2007, 2008.

If you need further assistance please feel free to contact us. Thank you
In advance for your help.

Sincerely,


Martha O. Valencia