PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

REIN	RPORAT ISTATÉN				netary	MENT OF of State reporations			FI	_ED		l	92	
DOCUMENT # P05000133812									DEC 1	5 PM 2	: 37			
	ESPE	RANZ	A CAFE	, CORP.	RP.					Y OF ST SEE, FL			•	
: Principal Office Address									CIL		ML	N. 177	~	
	_		Avenue	* Making Office Address II 1901 NW S.River Driv				E (()	7 T.Z.	CR2E081 (7	
1 to, Apt. K, ola.				Suite, Apil II, etc.				06						
1 /& State				Apartment 13				To Date incorporated or Qualified To Do Business in Florids 9/29/2005						
Miami Florida 33142				αγάδω: Miami Florida 33125				56 FEI Number 75-3214433 Applied For Not Applicable						
331	42	2 Country U.S.A.		жр 33125		Country U.S.A	Т ы,	G. CERTIFICATE OF STATUS DEGREED			56.75 Administration			
	7. Name and Address of Ourrent Registered Agent													
	Name ROMELIA RODRIGUEZ													
8trant Address (P.O. Box Number is Not Acceptable) 1901 N.W. South River Drive														
	Sulle, Apl. #, Etc.								12/19/0601018012 **11:0.00					
	City	<u>Apar</u> Miam	tment # i	<u> </u>					State FL	25 Code 3 3 1 2	5	1		
i, being appointed the registered agent of the above semed corporation, am familiar with and accept the obligations of section 607,0505 or 617,0503, F.S. Insture of justered Agent Carolina Registered Agent MUST-Stign Date 12/7/2006 REGISTERED AGENT MUST-Stign Date Dat														
Name	and Street Ac	dressee		for Director (Floride r		<u> </u>								
fities		Name of and/or Directors	Stroet Address of Eac Officer and/or Directo				`	City / State / Zip						
DP	ROME	RODRIGUI	2Z 1901 NW S.Rive				r Dr.	Mian	ni Fl	33125				
			, , , , , , , , , , , , , , , , , , ,	Apartment #13										
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L 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 whon filling this reinstretement 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 oved by the corporation nave boon paid and the names of individuals sated on this form do not quality for an exemption under section 119.07(3)(I), 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 ceth.														
IGNATURE: 12/7/2006 (305)362-913												9139		
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LA ESPERANZA CAFE CORP 1901 N.W. South River Drive Apartment #13 Miami Florida 33125

December 14, 2006

DEPARTMENT OF STATE DIVISION OF CORPORATIONS Tallahassee, Florida

Re.: Reinstatement Corporation

Gentlemen:

The reference of this letter is to advice the fact, that I sent recently application for Reinstatement of my corporation Document number P05000133812, due to I did not received the Annual Report 2006.

This is my first time doing business, and I just find out that the 1st of May had to be paid to be on time.

I am sorry for this inconvenience, and I appreciated your help in this matter and accept my payment of \$150.00.

Sincerely,

Romelia Rodriguez, President LA ESPERANZA CAFE CORP.