PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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REIN	STAT	EME	NT



FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P06000066244

1. Corporation Name

EPIC 4014 CORP.

FILED

09 JAN 21 PM 12: 46

SECRETARY OF STATE TALLAHASSEE, FLORIDA

				Office Address BAYSHORE DRIVE			500141607615 01/21/0901014006 **450.00			
			Suite, Apt. #, etc.		REINSTAFFEMENTO					
SUITE 906 SU		SUITE 90	<u> </u>		4. Date Incorporated or Qualified To Do Business in Florida 05/10/2006					
City & State COCONUT GROVE FL		City & State	COCONUT GROVE FL			5. FEI Numbe 20485518	Applied For 204855188 Applied For Not Applied Por			
^{Zip} 33133	Country USA	Zip 33133		Count USA	•		6. CERTIFICATE		75 Additional Fee required or a Certificate of Status	
	7. Name and Addres	of Current Regis	tered Age	nt						
Name JORGE L. GURIAN							☑ The reinstatement fee is imposed, except in			
Street Address (P.O. Box Number is Not Acceptable) 2665 S. BAYSHORE DRIVE							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.			
Suite, Apt. #, Etc. SUITE 906										
COCONUT GROVE				State Zip Code 33133						
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the Signature of Registered Agent REGISTERED AGENT MUST SIGN						pt the ot	o obligations of section 607.0505 or 617.0503, F.S. Date			
9. Name	s and Street Africesses of Each Officer	and/or Director (Flo	rida nonpr	ofit corpo	rations must	list at le	ast 3 directors)			
Titles	Name of			Street Address of Each Officer and/or Director			· · · · · · · · · · · · · · · · · · ·	City / Sta	te / Zip	
SD	Carmen Fernandez de Diaz			2665 SOUTH BAYSHORE DR.			DR.	COCONUT GROVE	Ē, FL 33133	
SD	Antonio Jose Diaz Fernan	z Fernandez			2665 SOUTH BAYSHORE DR.			COCONUT GROV	E, FL 33133	
PD	Antonio Jose Diaz Gonzalez			2665 SOUTH BAYSHORE DR.			DR.	COCONUT GROVE	E, FL 33133	
									JC1/21	

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 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.

SIGNATURE:

Antonio Jose Diaz Gonzalez

JOHATURG AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/09

305-279-4101

Daytime Phone #



January 20, 2009

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

Re: EPIC 4014 CORP. (P06000066244)

To Whom It May Concern:

Enclosed please find the Corporate Reinstatement Report for EPIC 4014 CORP. The annual Uniform Business Report had not been filed previously because the principal officer/ director had never received the renewal package during calendar year 2007, 2008 or 2009. 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 2007, 2008 & 2009.

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,

IORŒE L. GURIAN

ANTONIO J**ŐS**É DIAZ GONZALEZ

Enclosure