PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

		1
CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P12000078739		500251704035 03/13/1301035003 **600.00
1. Corporation Name TG Gter TT COVD.		
16673 6W 80 Terr.		500251704035 03/13/1301035004 **150.00
· Uiami, FL. 33193		5002517'04035 09/13/1301035005 **8.75
2. Principal Office Address - No P.O. Box #	3. Mailing Office Address 16673. SW-80 TEYY.	09/13/1301035005 **8.75
Suite, Apt #, etc.	Suite, Apt. #, etc	CR2E081 (11/10)
City & State	City & State	Date Incorporated or Qualified To Do Business in Florida O9/17/12
Liami, FL.	Miami, Fl.	5. FEI Number Applied For Not Applicable
33193 COUNTY USA	33193 Country	G. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
	Current Registered Agent	7.9. 1 3
Julio Vargas		SS SE
Street Address (P.O. Box Number) is Not Acceptable) 1 V V 13 5W SO Tell.		P 30
Suite, Apt. #, Etc.		0 2
Miami	FL 33/92	
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)		
Titles Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zıp
P Seraio Aravello	1621 NW 31 Ave.	Hiomi FL 33125
VP Tulio Vardas	16673 SW 80 To	
V1) 110 V01040	160 13 500 00 19	119111, 11. 55175
	-	
		SEP 3 0 2013
		M. WILLIAMS
^{10.} E-mail Address:		
(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 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that are undermation submitted in a document to the Department of State constitutes a third degree felopy as proyided for in s.817.155. F.S.		