

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P36175

1. Corporation Name
ANAJO INVESTMENTS CORPORATION

FILED

96 NOV -7 AM 8: 19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

7038 W SAMPLE RD
CORAL SPRGS FL 33065
US

Mailing Address

7038 W SAMPLE RD
CORAL SPRGS FL 33065
US



REINSTATEMENT *ab*

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable <i>7038 W SAMPLE ROAD</i>		3. New Mailing Office Address, If Applicable <i>7038 W SAMPLE ROAD</i>		4. Date Incorporated or Qualified To Do Business in Florida 11/04/1991	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 65-0292022	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DCP	SHTEREMBERG, JOSE	SIERRA VERTIENTES	MEXICO
DVC	SHTEREMBERG, ANA R.	SIERRA VERTIENTES	MEXICO
D	DE GOLBERG, BETTY S.	BOSQUE DE VALLIARTE 9	MEXICO
D	SHTEREMBERG, PERLA	SIERRA CHALCHIHUI	MEXICO
VP	SHTEREMBERG, ANA R.	SIERRA VERTIENTES	MEXICO
S	SHTEREMBERG, ISAAC	SIERRA CHALCHIHUI	MEXICO

8. Name and Address of Current Registered Agent

ROSE, LEO, JR.
1111 LINCOLN ROAD
SUITE #500
MIAMI BEACH FL 33139

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc. *306602003089-5*
City *11/13/96-01115-013*
State *FL* Zip *33139*

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent *Leo Rose*
LEO ROSE, JR. REGISTERED AGENT MUST SIGN

Date *SEP 30, 1996*

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No

(See other side for information on intangible tax.)

12. 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 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 oath.

SIGNATURE: *JOSE SHTEREMBERG*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JOSE SHTEREMBERG

X OCT 23, 1996
Date Daytime Phone

CR2390 (7/95)