PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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SIGNATURE: 12



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT	#	P9 2	200	00014	753
1. Cornoration Name		_		_	

Comek Corp.

FILED 00 OCT 17 PM 12: 14

SECRETARY OF STATE TALLAHASSEE FLORIDA

Principal Office Address 3. Mailing Office Address							5		•	
1400 NW 107th Ave. Suite, Apt. #, etc. 211. City & State Miami, F1		1400 NW	107th	Ave.		REINSTATEMENT				
		Suite, Apt. #, etc.	Suite, Apt. #, etc. 211		Ľ	4. Date Incorporated or Qualified				
		City & State Miami, F1			5	To Do Business in Florida 12/29/1992 5. FEI Number Applied Not Applied				
Zip 33172	Country USA	Zip 33172	Cou	ntry USA	6	•			\$8.75 Addition	Not Applicable nal Fee require sate of Status
		7. Name	and Addres	s of Current F	Registered A	Agent	-		ior a Certific	ate of Status
Suite,	t Address (P.O. Box Number is 1400 NW 107t Apt: #, Etc. 211	s Not Acceptable) h Ave.	70003434197							
City					State	Zip Code 331	72	-		
Signature of Registered Agent V		REGISTERED AGENT					Date	10/1	1/00	
Titles	s and Street Addresses of Each Officer and/or Director (Plorida nonprofit corporations must Name of Street Address Officers and/or Directors Officer and/or				of Each	1 Each				
·P ·· Ric	cardo Geng	14	100 NW	NW 107th Ave. #211			Miami, F1 33172			
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