## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT OF Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		3.	FILED 6 DEC -5 PH 4: 04	
DOCUMENT # PAHODOOU 82U			SECRETARY OF STATE TALLAHASSEE, FLORIDA		
BUNKER HILL INVESTMENT TRADING CORP.					
Principal Place of Business  3525 N.W. 7TH ST.  MIAMI, FL 33125			REINSTATEMENT Q		
Il above addressos are incorrect in any way, line through incorrect Information and enter co  New Principal Office Address, If Applicable  3. New Mailing Address, II Applicable  3. New Mailing Address, II Applicable  3. New Address of the Address of the Applicable  3. New Address of the Address of the Applicable  3. New Address of the Address of the Applicable  3. New Address of the Address of the Applicable  3. New Address of the Applicable  4. The Applicable  4. The Applicable  4. The Applicable  5. The Applicable  6. The Applicable  7. The Applicable  8. The Applicable  9. Th		If Applicable	DO NOT WRITE IN THIS SPACE  4. Date incorporated or Qualified To Do Business in Florida		
3525 N.W. 7TH ST. Suite, Apt. #, etc.	3525 N.W. 71 Suite, Apt. #, etc.	н 51.			
City & State City & State			5. FEI Number Applied For 65-0473080 Nat Applied For		Applied For Not Applicable
MTAMI, FI.	MI FI MIAMI,		6S8.75 Additional 6		ditional Fee tequired
33125 DADE	33125	Country DADE	<u> </u>	OF STATUS DESIRED [	erfilicate of Status
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  Name of Officers Street Address of Each					
Title(s) and/or Directors		Officer and/or Director o NOT Use Post Office Box	· i	City / State / Z	P
PRES. DIR. JEANNETTE GONZALEZ 35:		3525 N.W. 7TH ST.		MIAMI, FL 33125	
22				<u> </u>	
		-12/06/96010 ****375.00 **			
7					
				MAG	90
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent		
MICHAEL L. BERGER JEA			NNETTE GONZALEZ		
			9.5. Box Humbey (F. Hick Acceptable)		
SUITE 313 MIAMI, FL 33125	Suite, Apt. #, Etc	Suite, Apt. #, Etc.			
l ——			MIAMI, Stale Zip.Code 33125		
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 Date 11/30/96  REGISTERED AGENT MUST SIGN					
C made in the control of the control					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No X (See other side for information on intangible tax.)					
12. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, it release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access, it certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 507 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., and that all fees owed by the corporation have been paid. The information insteaded on this application is true and accurate, and my signature shall have the same tegal effect as if made under eath.					
SIGNATURE: JEANNETTE GONZALEZ CAMPILLE ONSALY 11/30/96 (305) 644-9255  SIGNATURE AND TYPED OR PRINTED NAME OF					