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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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|---|---|--------------------------------|---------------------------|--|-----------------------|---|-----------------------------|----------------------------|
| | RPORAT NSTATEM | | S | DEPARTMENT OF STATE Secretary of State ISION OF CORPORATIONS | | | FILED 03 APR - 4 A | |
| DOCUMENT # P94000039682 1. Corporation Name | | | | | 1 XX | <u></u> つ | SECRETARY C TALLAHASSEE. | FLORIDA |
| Bur | ma Jew | elers Inc. | | | V | | | |
| | | - 6 4w | . 1 | | 200 |)]- | 2003 | 3 UB |
| ,2. Principal Office Address 169 East Flagler St | | | 1 | 3. Mailing Office Address 169 East Flagler St | | 34/00 (04/00 | 3015319 30104102 | 5838 10 **450.00 |
| Suite, Apt. #, etc | | | #632 | | | orated or C | Qualified May 6 | 2004 |
| | City & State Miami | | | City & State Florida | | 6406 | | Applied For Not Applicable |
| ^{Zip} 33131 | | Country | 33131 | Country USA | 6. | FICATE OF STATUS DESIRED \$8.75 Additional for a Certificat | | |
| | | | 7. N | iame and Address of Current Register | red Agent | -بوستان | | |
| | Name Alberto Hernandez | | | | | | | |
| I | Street Address (P.O. Box Number is Not Acceptable) 20191 E-Country club drive | | | | | | | |
| i | Suite, Apt. #, Etc. #904 | | | | | | | |
| · | City Av | ventura | | | | State FL | Zip Code 33180 | |
| 8. I, being | appointed the | e registered agent of | the actove named corpor | sation, am familiar with and accept the o | bligations of section | 607.050 | 5 or 617.0503, F.S. | |
| Signature of Registered | | 1500 | REGISTERED AGE | ENT MUST SIGN | | Date _ | March 25 20 | 03 |
| 9. Namer | s and Street / | Addresses of Each Off | icer and/or Director (Flo | orida nonprofit corporations must list at le | east 3 directors) | | | |
| Titles | | Name of Officers and/or Dir | irectors | Street Address of Each Officer and/or Director | | City / State / Zip | | |
| Presider | Alberto Hernandez Jr. | | | 20191-E-country Club dr.#904 | | Aventu | ura Florida 3318 | 30 |
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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 filting 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-5770880

Date

Daytime Phone #



To: Florida Department of State

From: Burma Jewelers Inc FEI Number: 650506406

My name is Alberto Hernandez Jr, I am the president of Burma Jewelers Inc, I didn't know that my corporation was inactive, I wasn't able to pay the corporation annual fee because the papers were sent to a different direction, P.O Box 025323 Miami, Fl 33102. My current address is 169 E Flagler st. #632 Miami, Fl, 33131. I have already spoke with one of yours representative about my situation and we agreed to pay, no penalties just the corporate annual fees of \$450.

I am sending you the corporation reinstatement paper and the check adjust to this letter.

Thank you very much for your understanding

Alberto Hernandez