FILED
2007 NOV -8 PM 2:51
SECRETARY OF STATE
TALLAHASSEE FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE C(

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT

06-07

CR2E081 (1/07)

DOCUMENT # P94000080484

1. Corporation Name

Pemur Trading Corp.

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
11014 NW 33 ST.	
Suite, Apt. #, etc.: SUITE 100	Suite, Apt. #, etc.
City & State: DORAL, FLORIDA	City & State
Zip: 33172 Country: U.S.	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida: 11/02/94

FEI Number: 65-0532106 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☑ $5.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Joseph H. Serota, Esq.

Street Address (P.O. Box Number is Not Acceptable): 2525 Ponce de Leon Boulevard

Suite, Apt. #, Etc.: Suite 700

City: Coral Gables, Florida State: FL Zip Code: 33134

☐ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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: JHSerota Date: 11/8/07

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 / Zip
DPST	RAUL PEDRAZA	11014 NW 33 ST.	Miami, Florida 33172

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 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 contained in Chapter 119, 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: Raul Pedraza 11/8/07 305 392 4727

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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Florida Department of State
Division of Corporations
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CORPORATION REINSTATEMENT

PEMUR TRADING CORP.

Certificate of Status	1
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Estimated Charge	~~$908.75~~ $917.50

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