


2004

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

102

<b>CORPORATION</b> <b>REINSTATEMENT</b> <b>2004 AR</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> <b>Secretary of State</b> <b>DIVISION OF CORPORATIONS</b>	
<b>DOCUMENT #</b> P95000007352			
<b>1. Corporation Name</b> Implex Cargo, INC.			
<b>2. Principal Office Address</b> 2618 N.W. 72 AVE Suite, Apt. #, etc.		<b>3. Mailing Office Address</b> Same Suite, Apt. #, etc.	
<b>City &amp; State</b> Miami, FL		<b>City &amp; State</b>	
<b>Zip</b> 33122	<b>Country</b> Dade	<b>Zip</b>	<b>Country</b>

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>4. Date Incorporated or Qualified To Do Business in Florida</b>		<b>Applied For</b> <input type="checkbox"/>
<b>5. FEI Number</b> 65-2553276		<b>Not Applicable</b> <input type="checkbox"/>
<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status

<b>7. Name and Address of Current Registered Agent</b>		
<b>Name</b> YAMIL NADER		
<b>Street Address (P.O. Box Number is Not Acceptable)</b> 2618 N.W. 72 AVE		
<b>Suite, Apt. #, Etc.</b>		
<b>City</b> Miami	<b>State</b> FL	<b>Zip Code</b> 33122

<b>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.</b>	
<b>Signature of Registered Agent</b> [Signature]	<b>Date</b> 10/5/04

<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b>			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	FARITH NADER.	2618 NW 72 AVE	MIAMI FL 33122
V	JORGE ARIAS.	2618 NW 72 AVE	MIAMI-FL 33122
T	YAMIL NADER.	2618 NW 72 AVE	MIAMI FL 33122
S	LILIANA NADER.	2618 NW 72 AVE	MIAMI FL 33122
400041704584 10/08/04--01017--011 **150.00			

<b>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 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.</b>	
<b>SIGNATURE:</b> [Signature]	<b>Date</b> 10/5/04
<b>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</b>	<b>Daytime Phone #</b> 305-477-3144

CR25061 (01/04)



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2082

October 05, 2004

Florida Department of State  
Corporation Reinstatement

Dear Revenue agent:

Please be aware We did not received the first notice of the Annual Corporate Report, Our address has changed, Please see below.

**Old Address**  
2620 NW 72 Ave.  
Miami, FL. 33122

**New Address**  
2618 NW 72 Ave.  
Miami, FL. 33122

Thank You in advanced for your attention in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Yamil Nader', is written over a printed name.

Yamil Nader

2618 NW 72 Ave. Miami, FL. 33122  
www.impexcargo.com

Tel: 305 477 3144 Fax: 305 477 2093