PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Sandra B. Mortham · FOR FILED Secretary of State REINSTATEMENT **DIVISION OF CORPORATIONS** 96 NOV 20 AH 11: 54 DOCUMENT # P95000007737 1 Corporation Name SECRETARY OF STATE TALLAHASSEE, FLORIDA IMPORT - EXPORT TRADING & PURCHASING INC. Principal Place of Business Mailing Address .0449 N.W. 15TH 6T. If above addresses are incorrect in any way, line through incorrect information and enter correction below. 23. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 01/30/1995 5. FEI Number Applied For 0553502 City & State Not Applicable Country 75 Artes Contact Contact CERTIFICATE OF STATUS DESIRED 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) Officer and/or Director (Do NOT Use Post Office Box Numbers) and/or Directors City / State / Zip D PINCKNEY, CARLOS 9448 N.W. 13TH ST. MAMI FL 33172 100002011741---11/22/96--01002--025 ****375.00 ****375.00 <u> 100002011741</u> 11/22/96--01002--026 ******8.75 ******8.75 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent PICKNEY, CARLOS Street Address (P.O. Box Number is Not Acceptable) MEMORY 355 NW 24 STREET MIAMI PL 33127 Suite, Apt. #, Etc. City 10. I, being appointed the registered agency 10 grows named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN Does this corporation pay any intangible tax to the (See other side for information Dept. of Revenue under S. 199.032, Florida Statutes. on intangible tax.) Yes : 12. 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 filling this ceinstatement 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: