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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.


FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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04/09/03--01082--002 **500.00

CORPORATION



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000036103

1. Corporation Name
The Silver Plate of Miami, Inc.

2. Principal Office Address 407 Lincoln Road		3. Mailing Office Address	
Suite, Apt. #, etc. Suite 6G		Suite, Apt. #, etc.	
City & State Miami, Florida		City & State	
Zip 33139	Country USA	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida 05/08/1995

5. FEI Number 650626481

Applied For	
Not Applicable	

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name Miami Corporate Systems, Inc.

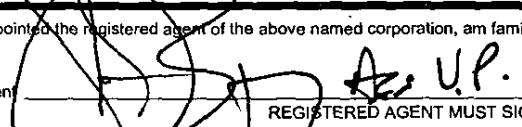
Street Address (P.O. Box Number is Not Acceptable) 283 Catalonia Avenue

Suite, Apt. #, Etc. Second Floor

City Coral Gables

State FL	Zip Code 33134
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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  Date 03/27/2003


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
DPT	Ricardo D. Carozzi	100 Lincoln Road, Apt. 721	Miami Beach, FL 33139
DVPS	Daniela S. Carozzi	100 Lincoln Road, Apt. 721	Miami Beach, FL 33139
D	Ricardo E. Carozzi	100 Lincoln Road, Apt. 721	Miami Beach, FL 33139

04-03-178

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.

SIGNATURE:  DANIELA S. CAROZZI Date 4/3/2003 Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (10/02)

DVPS

RASCO REININGER PEREZ & ESQUENAZI, P.L.
ATTORNEYS & COUNSELORS AT LAW

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José Manuel Pallí
Of counsel

*Board Certified-Business Litigation

April 3, 2003

Via Certified Mail

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 30314

Re: **Reinstatement of The Silverplate of Miami, Inc. (the "Corporation")**
Document # P95000036103

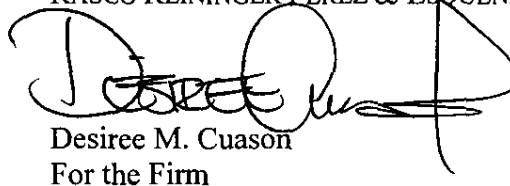
Dear Sir or Madam:

Enclosed please find a Corporation Reinstatement application for the above-referenced Corporation. Further enclosed is check number 1598 in the amount of \$600.00, which amount represents the reinstatement fee through 2003. Please be advised that Annual Business Reports for the prior years were never received. Further note that the address for the Registered Agent has been changed.

Thank you for your prompt attention to this matter. Please do not hesitate to contact me should you have any further questions.

Very truly yours,

RASCO REININGER PEREZ & ESQUENAZI, P.L.


Desiree M. Cuason
For the Firm

DMC/dmc
1682.0002/346368.doc