
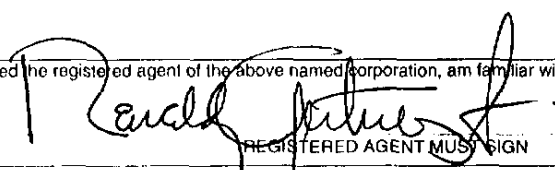
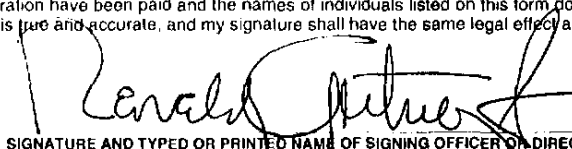


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 98 MAR 16 PM 3:24 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # P95000051425					
1. Corporation Name INTERSERVER, INC.					
Principal Place of Business c/o Comexter Trading, Inc. 8372 NW 64th St. Miami, FL 33166			Mailing Address c/o Comexter Trading, Inc. 8372 NW 64th St. Miami, FL 33166		
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Office Address, If Applicable c/o Comexter Trading, Inc. Suite, Apt. #, etc. 8372 NW 64th St. City & State Miami, FL Zip Country 33166 USA		4. Date Incorporated or Qualified To Do Business in Florida 6/29/95	
		5. FEI Number 65-0689020		Applied For <input type="checkbox"/> Not Applicable	
		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
1	2	3	4	5	6
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip		
D/P	Mario J. Dominguez	Av. de Mayo 881-Piso 3 1084	Buenos Aires, Argentina		
D/VP	Hector R. Alonso de Armijo	Av. de Mayo 881-Piso 3 1084	Buenos Aires, Argentina		
D/S	Carlos G. Arguindegui	Ave. de Mayo 881-Piso 3 1084	Buenos Aires, Argentina		
AS	Renaldy J. Gutierrez	601 Brickell Key Dr. Suite 501	Miami, FL 33131		
REINSTATEMENT			4000002462544--0 -03/19/98--01109--002 *****900.00 *****900.00		
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent		
Signature of Registered Agent: 			Name Renaldy J. Gutierrez		
			Street Address (P.O. Box Number is Not Acceptable) 601 Brickell Key Drive		
			Suite, Apt. #, Etc. 4501		
			City Miami State FL Zip Code 33131		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent: _____ Date March 10, 1998					
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (See other side for information on intangible tax.)					
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 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: 			March 10, 1998 (305-577-4500)		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Renaldy J. Gutierrez			Date Daytime Phone #		

CR2040 (1/98)