

Pg 10 F2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 DEC 29 PM 4:34

CORPORATION  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 995000066907

1. Corporation Name

Omnibus Aliados Corporation

2. Principal Office Address

1261 San Miguel Ave.

Suite, Apt. #, etc.

City & State

Coral Gables, FL

Zip  
33134

Country

USA

3. Mailing Office Address

1261 San Miguel Ave.

Suite, Apt. #, etc.

City & State

Coral Gables, FL

Zip  
33134

Country

USA

REINSTATEMENT  
CR2E081 (8/05)

04-05

4. Date Incorporated or Qualified  
To Do Business in Florida

8/28/95

5. FEI Number

05-0665148

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

Mercedes Rodriguez

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

1261 San Miguel Avenue

Suite, Apt. #, Etc.

City

Coral Gables

State

FL

Zip Code

33134

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

*Mercedes Rodriguez*  
REGISTERED AGENT MUST SIGN

Date

11/29/05

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
P	Mercedes Rodriguez	1261 San Miguel Ave.	Coral Gables, FL 33134

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)(l), 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:

*Mercedes Rodriguez*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/29/05

Daytime Phone #

12/29/05

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**RACHLIN, SAUNDERS & ASSOCIATES**  
Accounting & Tax Services

11120 N. Kendall Dr., Suite 201  
Miami, FL 33176  
Phone (305) 270-2040  
Fax (305) 595-8695  
Email: rachlinsaunders@bellsouth.net

November 8, 2005

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

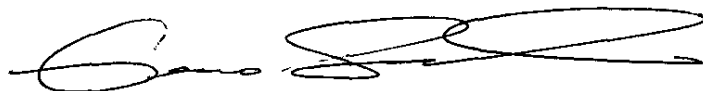
RE: Omnibus Aliados, Inc.  
Doc Numb: P95000066907

Dear Sir or Madam,

We are the new accountants for the above taxpayer and are writing to you on their behalf. We are at a loss as to why the taxpayer never received their notice to file the UBR for 2004 and 2005. The taxpayer went through some hardships in 2004 dealing with the loss of their previous accountant, so they were unaware of such filing.

We have enclosed a check for \$300.00 to cover 2004 and 2005. We would greatly appreciate that you abate all penalties due to the information we stated above.

Very Truly Yours,



Geno Saunders  
RACHLIN, SAUNDERS & ASSOCIATES