PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED AND FILED

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

96 OCT 30 AM 9:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000082003

1. Corporation Name

Olitex Trading Corporation

400001998294--7
-11/07/96--01003--022
****375.00 ****375.00

Principal Place of Business
2000 S.E. 1st Street
Suite 811-812
Miami, FL 33133

Mailing Address
same

REINSTATEMENT 96

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable	3. New Mailing Address, If Applicable
2000 S. Dixie Hwy	2000 S. Dixie Hwy
Suite, Apt. #, etc. SUITE 100	Suite, Apt. #, etc. SUITE 100
City & State MIAMI FL	City & State MIAMI, FL
Zip 33133 Country USA	Zip 33133 Country USA

4. Date Incorporated or Qualified To Do Business in Florida 10/23/95

5. FEI Number x65-0622129 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P,S	EDUARDO DIAS OLIVIERI	2000 S. DIXIE HWY, STE 100	MIAMI, FL 33133
V,T	RICARDO COELHO TEIXEIRA	2000 S. DIXIE HWY, STE 100	MIAMI, FL 33133

8. Name and Address of Current Registered Agent

MARTTI KALKAS
15419 SW 54 STREET
MIAMI, FL 33185

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City | State FL | Zip Code

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 Martti Kalkas Date 8/13/96

REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒ (See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: Ricardo Coelho Dixie 8/13/96 305 856-0012

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E036 (1/96)