2004 FOR PROFIT CORPORATION REINSTATEMENT

6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HUARTE, EDUARDO H 14962 SW 75 TERRACE MIAMI, FL 33193	Applied For Not Applicable 75 Additional Required
#647 MIAMI, FL 33132 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Country Zip Country Zip Country Country 5. Certificate of Status Desired Fee F 6. Name and Address of Current Registered Agent HUARTE, EDUARDO H 14962 SW 75 TERRACE MIAMI, FL 33193 City The state of State S	Applied For Not Applicable 75 Additional Required
#647 MIAMI, FL 33132 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Country Zip Country Zip Country Country 5. Certificate of Status Desired Fee F 6. Name and Address of Current Registered Agent HUARTE, EDUARDO H 14962 SW 75 TERRACE MIAMI, FL 33193 City FL Zip City City REIN-P CR2E098 (Country Country A. FEI Number 65-0667222 Fee F 7. Name and Address of New Registered Agent Name City Street Address (P.O. Box Number is Not Acceptable)	Applied For Not Applicable 75 Additional Required
#647 MIAMI, FL 33132 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Country Zip Country Zip Country Country 5. Certificate of Status Desired Fee F 6. Name and Address of Current Registered Agent HUARTE, EDUARDO H 14962 SW 75 TERRACE MIAMI, FL 33193 City FL Zip City City REIN-P CR2E098 (Country Country A. FEI Number 65-0667222 Fee F 7. Name and Address of New Registered Agent Name City Street Address (P.O. Box Number is Not Acceptable)	Applied For Not Applicable 75 Additional Required
2. Principal Place of Business ,3. Mailing Address Suite, Apt. #, etc. 12062004 REIN-P CR2E098 (City & State City & State 4. FEI Number 65-0667222 Zip Country Zip Country 5. Certificate of Status Desired 583.7 Fee for 14962 SW 75 TERRACE MIAMI, FL 33193 City City FL Zip City FL Zip City Teet Address (P.O. Box Number is Not Acceptable)	Applied For Not Applicable 75 Additional Required
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City & State 4. FEI Number 65-0667222 5. Certificate of Status Desired Fee Fee Fee Fee Fee Fee Fee Fee Fee F	Applied For Not Applicable 75 Additional Required Tip Code
Zip Country Zip Country 5. Certificate of Status Desired See Fee Fee Fee Fee Fee Fee Fee Fee Fee	Not Applicable 75 Additional Required
6. Name and Address of Current Registered Agent HUARTE, EDUARDO H 14962 SW 75 TERRACE MIAMI, FL 33193 City Fee F For F F F F F F F F F F F F F F F F F F F	Required
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HUARTE, EDUARDO H 14962 SW 75 TERRACE MIAMI, FL 33193 City Name Street Address (P.O. Box Number is Not Acceptable) FL Z	Tip Code
14962 SW 75 TERRACE MIAMI, FL 33193 Street Address (P.O. Box Number is Not Acceptable) City FL 2	
MIAMI, FL 33193 City FL 2	
FL)	
8. The above named entity submits this statement for the autobse of changing its registered office or registered agent, or both, in the State of Florida. I am familia	ar with and accept
	/ / 1
the obligations of registered agent.	, , ,
SIGNATURE X EDUARDO H. HUARTE 12/6	104
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE	
FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00 In accordance with s. 607.193 corporation did not receive the	
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	CTORS IN 11
— · · · · · · · · · · · · · · · · · · ·	Change 🔲 Addition
NAME HUARTE, EDUARDO NAME STREET ADDRESS 10743 SW 142 CT. STREET ADDRESS :	
CITY-ST-ZIP MIAMI, FL 33186	
	Change
NAMF NAMF	. –
STREET ADDRESS 500043369675 CITY-ST-ZIP 12/13/0401063003 **1	
TITLE - Delete TITLE - Delete	Change 🔲 Addition
NAME NAME	
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NAME NAME	mango roution
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CITY-ST-ZIP CITY-ST-ZIP	• [
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify the indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am are of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Blo changed, or on an attachment with an address, with all the risk empowered.	officer or director ck 10 or Block 11 if