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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 2006 JUN 15 PM 1: 07	
DOCUMENT # P9600003(3(0)		SECRETANT DI CHATE TALLAHASSEE, FLORIDA	
ADIA CORP.			
2. Principal Office Address 312A SW (2 AUE. Suite, Apt. #, etc.	3. Mailing Office Address 312A SW 12 AUE - Suite, Apt. #, etc.	CR2E081 (12/05) 4. Date Incorporated or Qualified	
City & State	Cia. 8 Chair	To Do Business in Florida	
M(AM(, FL.	City & State MIAMI, FL.	5. FEI Number Applied For	
Zip Country	Zip Country	6. Not Applicable 8.75 Additional Fee required	
33130 USA	33130 USA	for a Certificate of Status	
7. Name and Address of Current Registered Agent Name			
ALDA	AIDA LOPEZ		
Street Address (P.O. Box Number is Not Acceptable)			
Suite, Apt #, Etc.			
City MIAMI State Zip Code FL 33/30			
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 OFILA FORZ Date 06/13/06 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	
PTSD AIDA LOPEZ	2 236 SW (2 AU	16 MIAMI EL 33130	
TIEN LOICE		re. m(Am), Fl. 33130	
		B6/10/04	
	REMATATEMENT OS-DE		
	B AFTAGAGO		
		608076394736 06/20/0601061023 **300.60	
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 filling 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 contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the same lead effect as if made under cath			
SIGNATURE: SIGNATURE SIGNATURE OF BEILITED VALUE OF SIGNATURE OF DEPERTURE OF DEPER			

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We did no receive the annual report in 2005 for my corporation. We do not know why except that we have problems with the mail in the building.

We are giving you the annual report with the payment for two years and ask that the penalby be erased as we did not receive the report that you normaly mail out.

Thank you.

Aida Lopez