PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT			FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS				SECRETARY OF STATE DIVISION OF GORPORATIONS 03 AUG 21 AM 8:00					
DOCUMENT # P96000034063 1. Corporation Name PANADERIA PASTELERIA BELLA VISTA, INC.									ALL MI	າ ວະບຸນ		
TANADERIA TASTICACIÓN DELLA VIOLE, NOC.								800022461168 08/21/0301003002 **150.00				
					Was Address			REINSTATEMENT 02-03				
2. Principal Office Z220 NV	3. Mailing Office Address						to : T : Lo : T	00				
Suite, Apt. #, etc.	2220 NW 82nd, AVE Suite, Apt. #, etc.				05/21/02 91164 017 × 150.00							
, ,					4. Date Incorporated or Qualified							
City & State	Cliv's State				To Do Business in Florida 04/18-/1996							
MIAMI, FL			Miami, FZ				5. FEI Number 650686127			}- -	pplied For lot Applicable	
Zip		try .	Zip		Country		6.		1000	Asia emitted to all he	Station Bills a sheet or	
33122	U	.s.A.	33 2	-2:	V.S	А.	CERTIFICATE	OF STATU	S DESIRED 🔲	75 Addition for a Certific	ate of Status	
			7.	Name and A	ddress of C	urrent Register	ed Agent	. <u> </u>	· · · · · · · · · · · · · · · · · · ·		MPS	
	NARCO MALVENTANO											
	Street Address (P.O. Box Number is Not Acceptable)										-1	
9	9805 N.W 525+ #120								<u>.</u>	<u> </u>		
Suite, Apt. #, Etc.									3,			
City	71101	∞				<u> </u>		State FL	Zip Code	Q ·		
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	to the registe	ered agen of the abo	Z Z Cont	oration, am ta	amiliar with a	and accept the of	bligations of section	on 607,050				
Signature of Registered Agent	.		Y		·			Dale 08/19lo3				
· · · · · · · · · · · · · · · · · · ·			EGISTERED (GENT MUST	SIGN .		·			<u>.</u>		
9. Names and Stre	et Addresse	es of Each Office and	d/or Director (F	lorida nonprol	fit corporatio	ins must list at le	ast 3 directors)					
Titles	Name of Officers and/or Directors				Street Address of Each Officer and/or Director			City / State / Zip				
PSTD MA	MARCO MALVENTANO			9805 NW 52st. #120 Minn, PL. 33178				MIAMI, FL. 33178				
Tim av	EKi	HARADA	· · ·	1093	7 NW	43rd. LAN	JE	MiA	ii, FL.	33178		
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this reinstateme owed by the co	ent application poration have	or director or the ece in, the plason for diss we been paid and the d acqurate, and by s	olution has been names on indivi-	en eliminated, iduals listed o	the corpora n this form d	te name satisfies to not qualify for	the requirements an exemption und	of section	607.0401 or 617.0	401, F.S., th	at all fees	

SIGNATURE: L SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08/19/03 305-718-9966
Date Daytime Phone #

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL 32304

Dear Sirs,

This is to inform you that our company PANADERIA PASTELERIA BELLA VISTA, INC., Document Number: P96000034063; FEI_Number: 650686127_paid the fee of \$150.00 for the 2002 Annual Report with check #: 684 of Commerce Bank. We have been told that you received the payment but you needed information about the tittles of the officers for the company and that you sent a letter to us asking for that information but we never received such letter. So we kindly ask for you to reinstate our company to active status. Along with this letter, we are sending the reinstatement form with the payment of the fee.

Sincerely yours

Mardo Malventano

President