

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

97-98

FILED

98 MAY 11 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PA160000069242
1. Corporation Name
R&P International Traders Co.

Principal Place of Business Mailing Address
8881 S.W. 142th Ave. Suite # 37
Miami FL 33186

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		<u>08/19/96</u>	
City & State		City & State		5. FEI Number	
Zip		Country		<u>65-0688525</u>	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional fee required for a Certificate of Status	

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
D	Ruggiero Cingino	14180 S.W. 93 Ln. #14-30	Miami, FL 33186
V	Carlo Cingino	9055 S.W. 156 Ct.	Miami FL 33196
S	Marzy Cingino	9055 S.W. 156 Ct.	Miami FL 33196
REINSTATEMENT <u>97-98</u>			<u>SL 5-14-98</u>

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
<u>RUGGERO CINQUINO</u>		Name	
<u>8881, S.W. 142 Ave. Suite 37</u>		Street Address (P.O. Box Number is Not Acceptable)	
<u>MIAMI FL. 33186</u>		Suite, Apt. #, Etc. <u>500002530995-0</u>	
		City	
		State Zip Code <u>FL 33186</u>	

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 [Signature] REGISTERED AGENT MUST SIGN Date 05/06/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)

12. 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)(i), 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: [Signature] RUGGERO CINQUINO Date 04/24/98

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

CPRE040 (1/98)