

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000032832 1. Corporation Name I. R. International			
2. Principal Office Address 1620 NW 21st.		3. Mailing Office Address 2140 NW 13 th Ave.	
City & State Miami FL		City & State Miami, FL	
Zip 33142		Zip 33142	
Country USA		Country USA	

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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4. Date Incorporated or Qualified To Do Business in Florida May 7, 1997	
5. FEI Number 650746252	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED ☒	

7. Name and Address of Current Registered Agent Name Ramon Reyes Street Address (P.O. Box Number is Not Acceptable) 806 NW 135 terr Suite, Apt. #, Etc. City Pembroke Pines		State FL	Zip Code 33028
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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 Ramon Reyes Date 12/31/03

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
P	Ramon Reyes	806 NW 135 terr	Pembroke Pines, FL 33028

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 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: Ramon Reyes Date 12/31/03 Daytime Phone # 786-586-3090

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR