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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

01 MAY 30 PM 3:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P97000064155**

1. Corporation Name  
**CUZCATLAN BEVERAGES, INC.**

2. Principal Office Address  
**10661 N. Kendall Dr.**

Suite, Apt. #, etc.  
**118**

City & State  
**MIAMI, FL**

Zip  
**33176**

Country  
**U.S.**

3. Mailing Office Address  
**13015 SW 89th PL.**

Suite, Apt. #, etc.  
**#225**

City & State  
**MIAMI, FL**

Zip  
**33176**

Country

4. Date Incorporated or Qualified To Do Business in Florida  
**7/24/1993**

5. FEI Number  
**650780382**

Applied For  
Not Applicable

6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name  
**Jaime M. Giannattai**

**200004481832-4**  
~~07/18/01-01002-002~~  
**\*\*\*\*158.75 \*\*\*\*158.75**

Street Address (P.O. Box Number is Not Applicable)  
**13015 SW 89th PL**

Suite, Apt. #, Etc.  
**#225**

City  
**MIAMI, FL**

State  
**FL**

Zip Code  
**33176**

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  
*[Signature]*  
REGISTERED AGENT MUST SIGN

Date  
**4/26/01**

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	GERMAN GIANNATTAI	13015 SW 89th PL #225	MIAMI, FL 33176
VP	GERMAN E. GIANNATTAI	13015 SW 89th PL, #225	MIAMI, FL 33176
S	JAIME M. GIANNATTAI	13015 SW 89th PL, #225	MIAMI, FL 33176
T	MARIA GIANNATTAI	13015 SW 89th PL, #225	MIAMI, FL 33176
			<i>MW</i>

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:

*[Signature]*  
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date  
**4/26/01**

Daytime Phone #  
**(205) 270-0033**

CR2E081 (9/99)

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**C.B.I., Inc.**

May 8, 2001

**Florida Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399**

**RE: Cuzcatlan Beverages, Inc. (Document # 97000064155)**

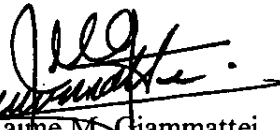
Dear Sir or Madam:

On several occasions I had informed your office advising them that our offices have moved. Therefore, our corporation had been cancelled due non-filing of annual report. I have contacted your office and I have been advised that the penalty would be waived based on the fact before mentioned.

Therefore, Find enclosed a copy of the Corporation Reinstatement for Cuzcatlan Beverages, Inc. and a check for the required fees.

I thank you for your attention to this matter and if you should have any further questions do not hesitate to contact me

Sincerely,

  
Jaime M. Giammattei  
Secretary

Enclosure: 2

**10661 N. Kendall Drive, Suite 118, Miami FL 33176  
Tel 305/270-0033 Fax 305/270-7565**