PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORA REINSTATE				Kather Secreta	RTMENT OF Sine Harris Iry of State CORPORATIONS	STATE	7		FILE URETARY ION OF CO OCT -6	OF STA RPORA			
DOCUMEN 1. Corporation Name					//								
WATE	5 V1	HIVEKSQ	. Co	rf									
2. Principal Office Address 3. Mailing Office Address													
1 NE 157	5To 202					į							
Suite, Apt. #, etc.	72,75	900 BAY DRIVE Suite, Apt. #, etc.				ļ							
	ı					4. Date Inco			•				
City & State		City & State				 	siness in F	lorida					
MIAMI FL			MIAMI BERG FC Zip Country				5. FEI Number Applied For Not Applied For						
Zip	Country	y	Zip		Country		6.		12/	50 7E		Applicat	
33 13Y	MIA	MI DAR	3 31	4/	MIAMI D	ode	CERTIFICA	TE OF STAT	US DESIRED 🔲	\$8.75 Add	rtificate	ol Statu	
			7.	Name and	Address of Curren	Registere	ed Agent						
Nanie	Nanie NAPIENO, JACOb												
Street Ac	dress IP C	Box Number is No	J Accontable)	2 <i>5</i>									
9	Street Address (P.O. Box Number is Not Acceptable) 900 DAY DRIVE Suite, Apr. #, Etc.							200080580402 -10/06/0601050014 **150_m					
	ol. #, Elc. -PT 4				1,1,1,1,1,1		TOVODVA	o010	<u> 20:::-1114</u>	**1 2 [7]			
City MIAMI Beas								Slale FL	Zip Code	141			
8. I, being appointed th	ne registere	ed agent of the above	a named corpo	oration, act (formiliar with and acc	ept the obl	ligations of sect	ion 607.050	05 or 617.0503,	F.S.	^		
Signature of Registered Agent		A C	γ	SELLIT MUST					7/1.9/		-		
9. Names and Street A	Addresses (of Each Officer and/o	or Director (Flo	onda nonpro	olit corporations mus	it list at lea	st 3 directors)						
Titles	Name of Officers and/or Directors				Street Address of Fach Officer and/or Director				City / State / Zip				
DDT TAR	TAPIENO, JACOS			900 Bay Drive APT				625 MIAMI BEAR FT 33 141					
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					2 13 (6)'-)		and the second s	20.00 W	06		· 		
							 - 						
					- · · · · · · · · · · · · · · · · · · ·								
10. I certify that I am an	officer or d	irector or the receive	er or trustee en	npowered to	execute this application	ation as pro	ovided for in cha	l pter 607 or	617, F.S. I lunt	ner certify th	al when	tiling	
this reinstalement ag owed by the corpora	ilion have b	he reason for dissolute name of the name o	mes of indicate	uals listed o	n this form do not qu	atity for an	ne requirements exemption und	of section er section 1	607.0401 or 613 119.07(3)(i), F.S	7.0401, F.S. . The inform	, that all ation inc	lees sicaled	

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT DOCUMENT # P97 00 1. Corporation Name WATCH UH, VELLS &								
2. Princips! Office Address	3. Mailing Office Address	-[
1 NE 15T5T5TE202		1						
State, Apt. #, etc.	900 BAY Dal VL Suite, Apt #, etc.							
	City & State	Date Incorporated or Qualified To Do Business in Florida						
City & State	City & State	5. FEI Number Applied For						
M/AMI F	FILAMI ISLAND	65-077/137 Not Applicable						
33 134 MAMI DAM	MAMI BLACZ FC Zip Country 3 3141 MIAMI DADL	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee require for a Cartificate of Status						
	7. Name and Address of Current Register	red Agent						
NAPIENO, JACOB Street Address (P.O. Box Number is Not Acceptable) 900 DAY Drive Suite, Apt. 8, Etc. APT 625 City MIAMI Blass FL 33 141								
Signature of	ve named corporation, am familiar with and accept the of	bligations of section 607.0505 or 617.0503, F.S. Date: 7/1.9/0.4						
9. Names and Street Addresses of Each Officer and	Vor Director (Flouda nonprofit corporations must list at le							
Titles Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip						
DDT TAPIENO, JACO	5 900 BAY DIVE AP:	T 625 MIAMI BEAR 19 33 14/						
this reinstatement application, the reason for disso owed by the corporation have been paid and the n on this application is true and accurate, and my significant structures.	dution has been eliminated, the corporate name satisfies	provided for in chapter 607 or 617, F.S. I further certify that when Isling the requirements of section 607 0401 or 617.0401, F.S., that all fees an exemption under section 119.07(3)(i). F.S. The information indicated roaiit.						

Miami, Florida Tallahassee, Fl

Division of Corporation Tallahassee, Fl.

RE: Annual Report 2006 Watch Universe Corp Fl No. P97000066741 Fed ID # 65-0846716

Attached our check by \$ 150.00 covering the fee of the reference.

We never received the report in order to file it.

We went to the Bank to apply for a loan and they notice to us that the report was due and then we sent it.

Thank you for you attention to this question.

Jacob Tapiero

Miami, Florida Tallahassee, Fl

Division of Corporation Tallahassee, Fl.

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