

1092

APPLICATION FOR REINSTATEMENT
 FLORIDA DEPARTMENT OF STATE
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

DOCUMENT # P97000068549
 I. Corporation Name
 Esfera Corp.

05 JAN 11 PM 1:19
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address

REINSTATEMENT 02-05
 3. Date Incorporated or Qualified 8/7/1997
 3d. Date of Last Report 2001

2. Principal Place of Business
 21 101 Ocean Lane Drive
 Suite, Apt. #, etc. Unit 302
 City & State Key Biscayne FL
 Zip 33149 County MIAMI DADE

2a. Mailing Address
 26 101 Ocean Lane Drive
 Suite, Apt. #, etc. Unit 302
 City & State Key Biscayne, FL
 Zip 33149 County Miami-Dade

4. FEI Number 65-0838427
 Applied For Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
 Lizabeth F. Calvo
 328 Crandon Boulevard
 Suite 226
 Key Biscayne, FL 33149

10. Name and Address of New Registered Agent
 81 Name Lizabeth F. Calvo
 82 Street Address (P.O. Box Number is Not Acceptable) 328 Crandon Boulevard
 83 Suite 226
 84 City Key Biscayne FL 85 Zip Code 33149

11. Pursuant to the provisions of Sections 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.
 SIGNATURE Rebecca J. Anderson by R.L. Anderson as attorney-in-fact for Lizabeth Calvo 1-10-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, P Marcos A. Paley 101 ocean lane Drive #302 Key Biscayne, FL 33149	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S, D Marcos I. Paley 101 ocean lane Drive #302 Key Biscayne, FL 33149	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	N/A
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	N/A
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	300045660453
4.3 STREET ADDRESS	01/31/05--01017--012 **608.75
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, or on attachment with an address.
 SIGNATURE Rebecca J. Anderson by R.L. Anderson as attorney-in-fact for Marcos A. Paley (501)694-8107
Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #

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

Re: Esfera Corp.

Enclosed are the following:

1. Uniform Business Report for the company referenced above.
2. 608.75 check payable to Florida Department of State.

We never received the Uniform Business Report for the following year(s) that should have been mailed to us:

2002, 2003, 2004, 2005

Please waive the late filing fee and treat the company as never being administratively dissolved. Thank you.

By: Rebecca S. Anderson
by R.L. Anderson as attorney-in-fact

Name: Marcos Paley

Title: President

Date: January 10, 2005