

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

00 JUL -5 PM 5: 59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000015419

1. Corporation Name

ARTISTAS CREATIVOS INTERNATIONAL, INC.

2. Principal Office Address

1900 S. Treasure Drive

3. Mailing Office Address

1900 S. Treasure Drive

Suite, Apt. #, etc.

Suite 9-E

Suite, Apt. #, etc.

Suite 9-E

City & State

N. Bay Village, FL

City & State

N. Bay Village, FL

Zip

33141

Country

U.S.A.

Zip

33141

Country

U.S.A.

REINSTATEMENT

99-00

4. Date Incorporated or Qualified
To Do Business in Florida

2/16/98

SP

5. FEI Number

65-0837410

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

Geoffrey King Robinson, Esq.

Street Address (P.O. Box Number is Not Acceptable)

764 N.E. 111th Street

400003334854--7

-07/25/00--01047--005

****900.00 ****900.00

Suite, Apt. #, Etc.

City

Biscayne Park

State

FL

Zip Code

33161

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

Geoffrey King Robinson
REGISTERED AGENT MUST SIGN

Date 5-23-00

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
PS	Javier Fernandez	1900 S. Treasure Dr #9-E	N. Bay Village, FL 33141

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:

Javier Fernandez
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 23, 2000 305-868-8530
Date Daytime Phone #