	PLEASE REAPPLICATION FOR NSTATEMENT	FLORI	DA DEPARTME Sandra B. Mo Secretary of DIVISION OF CORPO	NT OF STATE ortham State		FILI	ΞD		
	CUMENT # P980000	62775				99 DEC -6 1			
	rcedes Real Estat	e Holdin	gs, Inc.			SECRETARY ( TALLAHASSEE	F STAT	E DA	
Principal I	Place of Business	Mailir	ng Address		_				
#1 Ke	O Grape Tree Driv OFN y Biscayne, FL 33	#10 3149 Key	Biscayne	, FL 3314	P RFIN	ISTATEN	ient	00	
	addresses are incorrect in any way, lir rincipal Office Address, If Applicable		information and enter iling Address, If Appli			DO NOT WHITE IN porated or Qualified	THIS SPACE		
Suite, Apt. #, etc. Suite, Apt. #,			#, elc.		-	To Do Business in Florida  July 16, 1998			
Cily & Sta	nte	)	,	5. FEI Numbe 65-08	65-0872959 Applied For Not Applicable				
Ζιρ	Country	Zip	Coun	Iry	6. CERTIFICATI	E OF STATUS DESIRED		ddibonal Fee required Pertificate of Status	
7. Names	s and Street Addresses of Each Officer		lorida nonprofit corpo	rations must list at lea	ast 3 directors)	<del></del>			
Title(s)				Street Address of Each Officer and/or Director  (Do NOT Use Post Office Box Numbers)			ity / State / 2	Zip	
PD	Mercedes Benacer de Nogueroles		Edif. Centro Impresarial Av. Universidad Piso 17			Venezi	uela		
<b>V</b> P				entro Impresarial Caracas, Venezuela Versidad Piso 17					
Jorge Nogueroles			Edif. Ce	Edif. Centro Impresaria Av. Universidad Piso 17			Caracas, Venezuela		
			1000030705916 -12/15/99-01013-021 ****758.75 ****758.75					<del>3021                                   </del>	
			, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·				LS	
8. Name and Address of Current Registered Agent				9. Name and Address of New Registered Agent					
	rt F. Hudson, Jr.			Name					
1200 Miam:	Brickell Avenue, i, Florida 33131								
				Suite, Apt. #, Etc.					
			City State Zip Code			Code			
O. I, bein	ng appointed the registered agent of the	above named cor	poration, am familiar v	vith and accept the o	bligations of Sect	ion 607.0505, F.S.	<u>-</u> -	<u>-</u> "	
ignature legistered	of Agent K- 4r/fud	REGISTERED A	GENT MUST SIGN			Date 11-29	-99		
l1. D	oes this corporation pa ept. of Revenue under	y any intan S. 199.032	gible tax to the formal states	he tutes. Yes	□ No.Ž		her side for n intangible		
iees c	the Division of Corporations from any that I am an officer or director or the cinstatement application the reason to ward by the corporation have been partial.	ied with this filing is iability of non-compreceiver or trustee dissolution has be id. The information	s voluntarily furnished bliance with Section 1 empowered to execu- ten eliminated, the co- indicated on this app	Merce	y for the exempticent that the inform provided for in cles the requirement accurate, and my des Bensgueroles	signature snall nave tr ACETTA f	1.07(3)(k), Fi ed exempt for I further ce or 617.040 he same leg	lorida Statutes. I re- rom public access. I rtify that when filing 1, F.S., and that all all effect as if made	

FED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Date

SIGNATURE: