PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

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

FILED
01 MAR 22 PM 2:40
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P98000096217

1. Corporation Name
BSF Worldwide, Corp.

2. Principal Office Address
5151 NW 74 Ave
Suite, Apt. #, etc.
MIAMI, FL
City & State
33166
Zip
Country
USA.

3. Mailing Office Address
P.O. BOX 66-8616
Suite, Apt. #, etc.
MIAMI, FL
City & State
33166
Zip
Country
USA

4. Date Incorporated or Qualified To Do Business in Florida 11-06-98

5. FEI Number
65-0875523
Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED $6.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent
Name
DIEGO SARRIA
Street Address (P.O. Box Number is Not Acceptable)
5151 NW 74 Ave
Suite, Apt. #, Etc.
MIAMI, FL
City
State FL
Zip Code 33166

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 X
REGISTERED AGENT MUST SIGN
Date

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	DIEGO Sarria	P.O. BOX 66-8616	Miami, FL 33166

REINSTATEMENT 001

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10. I certify that I am an officer or director of 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DIEGO SARRIA Pres 03-19-01 305 [illegible]

Date Daytime Phone #