PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** FILFD. Glenda E. Hood Secretary of State REINSTATEMENT **DIVISION OF CORPORATIONS** 03 OCT 23 AH 9:52 DOCUMENT # P99000011168 SECRETARY OF STATE TALLAHASSEE, FLORIDA 1. Corporation Name BLANCO & ASSOCIATES TRAFFIC SCHOOL, INC. Principal Place of Business Mailing Address 1570 W. 43RD PL., SUITE 34 1570 W. 43RD PL. SUITE 34 HIALEAH FL 33012 HIALEAH FL 33012 REMISTATEMENT 03 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable 2. New Principal Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 01/28/1999 Suite, Apt. #, etc. 5. FEI Number Applied For 06-5097157 City & St City & State Not Applicable \$8.75 Additional Fee required for a Certificate of Status CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each City / State / Zip Title(s) and/or Directors Officer and/or Director D VILLAMIZAR, ISABEL 1570 W 43 PL #25 HIALEAH FL 33012 900023743679 10/13/03--01060--008 **158.75 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name VILLAMIZAR, ISABEL Street Address (P.O. Box Number is Not Acceptable) 1570 W. 43RD PL., SUITE 34 HIALEAH FL 33012 Sulte, Apt. #, Etc. City Zip Code State 10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S. Signature of Registered Agent

11. 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ate Daytime Phone #

HIALEAH OCOTBER 08,2003

BLANCO & ASSOC. TRAFFIC SCHOOL "LA ESCUELITA" 1570 West 43 Pl. #245 Hioleph, H. 33912 Tel. 305-512-3555

DIVISION OF CORPORATIONS

ANNUAL REPORT/REINSTATEMENT SECTION

P.O. BOX 6327

TALLAHASSEE FL_32314 6327

TO WHOM IT MAY CONCERN:

THIS TO ADVICE YOU THAT AGAIN THE DOCUMENTS DID NOT REACH THIS OFFICE ON TIME. PLEASE! BE AWARE THAT THE CORRECT ADDRESS IS BLANCO TRAFFIC SCHOOL 1570 WEST 43 PLCAE # 25

HIALEAH FL 33012

TEL 305 512 3555.

FOLLOWING YOUR ADVICE I AM MAILING \$150.00 + \$8.75 FOR A CERTIFICATE OF STATUS.

SINCERELY,

ISÁÐÁL VILLAMIZAR