

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherin Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 MAY -2 AM 10:26

DOCUMENT #

P99000 029027

1. Corporation Name

A & R Enterprises USA Inc
DBA Complete Image Systems

2. Principal Office Address

13818 SW 139 CT

Suite, Apt. #, etc.

City & State

Miami Florida

Zip

33186

Country

Dade

3. Mailing Office Address

13818 SW 139 CT

Suite, Apt. #, etc.

City & State

Miami Florida

Zip

33186

Country

Dade

4. Date Incorporated or Qualified
To Do Business in Florida

3-29/99

5. FEI Number

65-0907887

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

Ricardo Acuña

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

15920 SW 141 TR

Suite, Apt. #, Etc.

City

Miami

000004272000-3

-05/21/01--01002--008

***300.00 ***300.00

State
FL

Zip Code

33196

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

REGISTERED AGENT MUST SIGN

Date 4-27/01

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

Presdt Ricardo Acuña

15920 SW 141 TR

Miami FL 33196

Vice Adriana Acuña

15920 SW 141 TR

Miami FL 33196

4/5/01

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, that all fees owed by the corporation have been paid and the names of individuals listed 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

Ricardo Acuña

Date

4-27/01 305 2569304

Daytime Phone #

CR2E031 (9/00)

A & R Enterprises U.S.A. INC.
DBA/ COMPLETE IMAGE SYSTEMS.

13818 S.W. 139th CT. Miami FL. 33186 PH # 305-256-9304 FAX # 305-259-5325

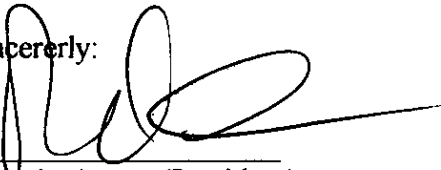
Florida Department of State
Corporation Reinstatement.

With this letter we are asking you to please remove the penalties that we are being charged.

We moved from the old address about two years ago and changes to this effect were never made we still think we receive mailed at that address. We ask you to please consider this situation and let us know about your decision.

We appreciate the importance you give to this matter.

Sincerely:

A handwritten signature in black ink, appearing to be 'Ricardo Acuna', with a long horizontal stroke extending to the right.

Ricardo Acuna (President).