

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED  
AND  
FILED

**CORPORATION  
REINSTATEMENT**



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

00 NOV 22 PM 3:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

400003478774--3  
-11/28/00--01089--017  
\*\*\*\*\*8.75 \*\*\*\*\*8.75  
400003478774--3  
-11/28/00--01089--018  
\*\*\*\*750.00 \*\*\*\*750.00

DOCUMENT # P99000048283

1. Corporation Name TERRA NETWORKS USA, INC.

|   |                 |                                   |                 |
|---|-----------------|-----------------------------------|-----------------|
| 2. Principal Office Address<br>Raissa Rouse, Esq.<br>1201 Brickell Ave. |                 | 3. Mailing Office Address<br>Same |                 |
| Suite, Apt. #, etc.<br>Suite 700  |                 | Suite, Apt. #, etc.<br>Same       |                 |
| City & State<br>Miami, Florida  |                 | City & State<br>Same              |                 |
| Zip<br>33131  | Country<br>Dade | Zip<br>Same                       | Country<br>Same |

|   |                               |
|---|-------------------------------|
| 4. Date Incorporated or Qualified To Do Business in Florida<br>5/26/99  |                               |
| 5. FEI Number<br>65-0938990   | Applied For<br>Not Applicable |
| 6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Administrative Fee required for a Certificate of Status |                               |

| 7. Name and Address of Current Registered Agent                           |             |                   |  |
|---|-------------|-------------------|--|
| Name<br>Corpdirect Agents   |             |                   |  |
| Street Address (P.O. Box Number is Not Acceptable)<br>103 N. Meridian St. |             |                   |  |
| Suite, Apt. #, Etc.<br>Lower Level  |             |                   |  |
| City<br>Tallahassee   | State<br>FL | Zip Code<br>32301 |  |

**REINSTATEMENT** *2000*

I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0505 or 817.0503, F.S.

Signature of Registered Agent: Cynthia A. Hicks Date: 11-22-00

REGISTERED AGENT MUST SIGN: Cynthia A. Hicks as agent

| Titles   | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip    |
|----------|-----------------------------------|--|-----------------------|
| Pres.    | Abel Linares                      | 1201 Brickell Ave.<br>Suite 700                | Miami, Florida, 33131 |
| CEO      | Antonio Garcia Urgeles            | Same   | Same                  |
| ex. V.P. | Manuel Bellod                     | Same   | Same                  |
| reas.    | Antonio de Esteban                | Same   | Same                  |
| COO      | Ignacio Ponce                     | Same   | Same                  |
| Sec.     | Raissa Rouse, Esq.                | Same   | Same                  |

I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 807 or 817, 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 807.0401 or 817.0401, 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 110.07(3)(f), 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: Raissa Rouse, Esq. Date: November 21, 2000 Daytime Phone #: 305 748 5555

CR2001 (8/00)