

JAN-30-02 WED 03:45 PM

LAZARUS CORPORATION

FAX: 3052201440

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

FILED

02 FEB -1 PM 2:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 99000048878

1. Corporation Name:

Speed Money International Services, Inc.

2. Principal Office Address

7700 N.W. 74 Avenue

Suite, Apt. #, etc.

Bay #2

City & State

Medley, FLORIDA

Zip

33166

Country

U.S.A.

3. Mailing Office Address

The Same

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 00-01

4. Date Incorporated or Qualified
To Do Business in Florida

1.999

5. FEI Number

65-0924030

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

José Soto

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

7700 N.W. 74 Avenue

Suite, Apt. #, Etc.

Bay #2

City

Medley

State

FL

Zip Code

33166

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 01-29-02

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
2d.	Ana Teresa Pelaez	7711 S.W. 136 Avenue	Miami, Fl. 33183
1st.	Demetrio Pelaez	7711 S.W. 136 Avenue	Miami, Fl. 33183

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, 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)(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: Ana Teresa Pelaez / President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/29/02 (305) 4083501

Date

Daytime Phone #