

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

4/12

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 MAY -5 AM 10:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **999 0000 94188**

1. Corporation Name

**ETNIA TRADING CORP**

2. Principal Office Address

**5780 S. PLUM BAY PK**

Suite, Apt. #, etc.

3. Mailing Office Address

**5780 S. PLUM BAY**

Suite, Apt. #, etc.

City & State

**TAMARAC, FL**

City & State

**TAMARAC, FL**

Zip  
**33321**

Country

**BROWARD**

Zip  
**33321**

Country

**BROWARD**

CR2E081 (12/05)

4. Date Incorporated or Qualified  
To Do Business in Florida

**10/26/1999**

5. FEL Number

**650971334**

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

**SASQUIA MIELES- MADRIGAL**

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

**5780 S. PLUM BAY PKWAY**

Suite, Apt. #, Etc.

**200075268802**

05/25/06 01010 015 ##158.75

City

**TAMARAC**

State  
**FL**

Zip Code  
**33321**

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

*Sasquia Mielles-Madrigal*  
REGISTERED AGENT MUST SIGN

Date **4/30/06**

**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
P	CARLOS MADRIGAL	5780 S. PLUM BAY PK	TAMARAC, FL 33321
VP	SASQUIA MIELES-MAI	5780 S. PLUM BAY PK	TAMARAC, FL 33321

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 contained in Chapter 119, 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:

*Sasquia Mielles-Madrigal*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/30/06**  
Date

**(954) 815-9275**  
Daytime Phone #

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April 30,2006

To whom it may concern:

Please be advised that I have not received the annual report notices in the past few years, therefore the status of my company has been inactive without me realizing this situation. I would like my company to be reinstated at your earliest convenience. Attached is the corporation reinstatement form with a check. Someone gave me this lead that I can go on-line to check the status of a company and this is the way I found out we were not active. I realized that since 2004 we have been inactive. The penalty for each year is \$150 since I did not receive a notice, so I am sending a check of \$458.75 which includes THE YEARS 2004,2005,2006 AND \$8.75 for a certificate of status for the current year. If you have any questions , please contact me at (954)815-9275

Thank you.

  
Sasquia Miele-Madriral