... PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

REIN	RPORATI STATEM JMENT	ENT	6608	DIVI	Secretar	RTMENT OF ry of State CORPORATIONS			Jt.0	RETARY	ED PM 3: 00 OF STATE		
1. Corporat		_	•	Ψ·	,				., , , , , , ,	ATTA JOE	L• I EGRIU	А	
2. Principal Office Address 2260 S.W. 87 AVE				3. Mailing Office Address				67/16/02 90364 018 18x5					
Suite, Apt. #, etc.				Suite, Apt. #, etc.				4. Date Incorporated or Qualified To Do Business in Florida					
City & State MIAMI, FL				City & State	City & State			5. FEI Number Applied For Not Applied For Not Applied For					
Zip 33165	Country USA		Zip ,		Country		6. CERTIFICATE OF STATU		_	\$8.75 Additional for a Certifical	I Fee required		
	7. Name and Address of Current Registered Agent												
	Name JULIO VALLADARES												
	Street Address (P.O. Box Number is Not Acceptable) 2260 S.W. 87 AVENUE Suits, Apt. #, Etc.							600049892696 					
City				11					State	Zip Code		4	
	MIAMI		 						FL	33165		<u></u>	
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 Date 3-10-05 REGISTERED AGENT MUST SIGN											CRZE081 (01/06)		
9. Names	and Street Ad	dresses	of Each Officer a	ind/or Director (Fic	orida nonpr	rofit corporations	must list at le	est 3 directors)					
Titles	Name of Officers and/or Directors			13	Street Address of Ea Officer and/or Direct				City / State / Zip				
P/T	MARLE	NE VA	ALLADARES	,	2260 S.W. 87 AVE				MIAMI, FL 33165				
VP/S	JULIO V	'ALLA	DARES		2260 S.W. 87 AVE			· ·	MIAMI, FL 33165				
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		·			<u> </u>	······································			73	. ~ · · · · · · · · · · · · · · · · · ·	5(
								EME			<u> </u>		
this rei	nstatement ap	plication,	, the reason for di	ceiver or trustee en	n eliminate	d, the corporate r	name satisfies	the requirements	of section	607.0401 or 6	17.0401, F.S., the	at all fees	
				e names of individual signature shall he					er section	118.07(3)(i), F.	a. The Imonnatio	ri indicated	
SIGNATURE: 3-10-05 SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR Data Daytims Phone #													

March 4, 2005

DEPT OF STATE DIVISION OF CORPORATION CORPORATE FILINGS P.O. BOX 6327 TALLAHASSEE, FLORIDA

Re: Party Rental Tents, Inc.

To Whom It May Concern:

Please note that we were never advised that Party Rental Tents was dissolved in the year 2002. We did not receive the letter of July 18.

I was told by your officer that by sending a check in the amount of \$450.00 Party Rental Tents will be reinstated. Enclosed you will find check number 2904 in the amount of \$450.00 to have this corporation reinstated

Your prompt attention to this matter will be greatly appreciated.

Sincerely,

MARLENE VALLADARES, PRESIDENT