

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 02 DEC 13 AM 9:17
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **V45101**

1. Corporation Name
LUNIA, INC.

Principal Place of Business	Mailing Address
11111 BISCAYNE BLVD UNIT 1205 MIAMI FL	1101 BRICKELL AVE STE 1700 MIAMI FL 33131

If above addresses are incorrect in any way, line through incorrect information and enter correction below.



2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida	06/22/1992
5. FEI Number	65-0365415
Applied For	
Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	BENASSI, WALDEMAR	11111 BISCAYNE BLVD 1205	MIAMI FL
D	BENASSI, ALICE ESTHER	11111 BISCAYNE BLVD 1205	MIAMI FL
D	BENASSI, HUMBERTO PAULO	11111 BISCAYNE BLVD 1205	MIAMI FL

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 12/12/02--01120--003 **150.00

02 UBR

8. Name and Address of Current Registered Agent

PENALVER, AURORA
 1101 BRICKELL AVE
 SUITE 1700
 MIAMI FL 33131

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City
State FL
Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent *[Signature]* Date 12-10-02

REGISTERED AGENT MUST SIGN

11. 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)(i), 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: *[Signature]* as attorney for Waldemar Benassi

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E040 (8/02)

PEÑALVER & PEÑALVER

PROFESSIONAL ASSOCIATION
ATTORNEYS AT LAW
1101 BRICKELL AVENUE
SUITE 1700
MIAMI, FLORIDA 33131

RAFAEL A. PEÑALVER, JR.
AURORA PEÑALVER SALAS

TELEPHONE
(305) 579-9000

TELEFAX: (305) 371-6117

December 10, 2002

Division of Corporations
Florida Department of State
P.O. Box 1500
Tallahassee, FL 32314

Re: LUNIA, INC.

Dear Sir/Madam:

To my surprise today we received Uniform Business Report ("UBR") from your office stating that our firm failed to timely file the UBR and that the filing fee was \$550.00.

We immediately reviewed our records and noted that we had not received any prior UBR for our firm. We received UBR's for the numerous corporations that we service for our clients and noted that all filings and payments were made in April.

Our firm routinely files all of our clients UBR's along with our own in April of each year. It is apparent that we did not receive a UBR for our firm until today.

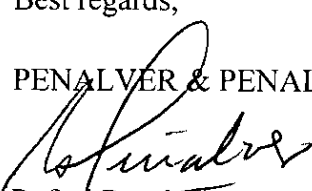
I respectfully request that you waive the late filing fee and accept the enclosed check # 5377 in the amount of \$150.00 along with UBR.

If you have any questions please call me.

Thank you for your consideration of this matter.

Best regards,

PENALVER & PENALVER, P.A.



Rafael Penalver

RAP/na

Encls.