

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1/2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 DEC -1 PM 12: 29

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V57633

1. Corporation Name

DIME IMPORT-EXPORT, INC.

W06-51696

2. Principal Office Address
7000 ISLAND BLVD

3. Mailing Office Address
7000 ISLAND BLVD

Suite, Apt. #, etc.
SUITE 2804

Suite, Apt. #, etc.
SUITE 2804

City & State
AVENTURA, FLORIDA

City & State
AVENTURA, FLORIDA

Zip
33160

Country
USA

Zip
33160

Country
USA

REINSTATEMENT

97-06

4. Date Incorporated or Qualified To Do Business in Florida 08/14/1992

5. FEI Number 65-0350390

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
MARIO GARCIA

Street Address (P.O. Box Number is Not Acceptable)
7000 ISLAND BLVD

Suite, Apt. #, Etc.
SUITE 2804

City
AVENTURA

State
FL

Zip Code
33160

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 NOVEMBER 28, 2006

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/T	MARIO GARCIA	7000 ISLAND BLVD-STE 2804	AVENTURA, FL 33160
V/S	DIANA PEREZ	7000 ISLAND BLVD-STE 2804	AVENTURA, FL 33160

510092327745
12/08/06--01052--019 **1500.00

510092327745
12/08/06--01052--019 **15.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

NOVEMBER 28, 2006

Date

Daytime Phone #

K. Eckel DEC 01 2006

2/2

TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

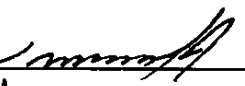
TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

BE ADVICE THAT I NEVER RECEIVED THE ANNUAL REPORT NOTICE SINCE 1997 FROM YOUR OFFICE TO PAY THE ANNUAL FEES. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS COMPANY IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY YOURS,



MARIO GARCIA
PRESIDENT