PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

1. Corporation Name V.I.P. INTERNATIONAL TRAVEL, INC.

Principal Place of Business

Mailing Address

170 S.W. 63 AVENUE MAIMI FI 33144

170 S.W. 63 AVENUE

MAIMI FI 33144

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

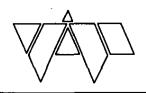


William 1 = 9= 11									
If above a	ddresses are	incorrect in any way line thr	ough incorrect is	nformation a	nd enter correction below				
If above addresses are incorrect in any way, line through incorrect in any way, line t						4. Date Incorp	4. Date Incorporated or Qualified To Do Business in Florida 05/24/1982		
Suite, Apt. #, etc. Suite, Apt. #						5. FEI Numbe	5. FEI Number 59-2211056 Applied For Not Applicable		
City & State City			City & State	ity & State					
Zip Country		Zip Countr		Country	6. CERTIFICATE	TE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status			
7. Names	and Street Ad	dresses of Each Officer and/	or Director (Flo	rida nonprof	it corporations must list at le	east 3 directors)			
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip		
PD	PUIG, IRE	NE .		170 S.W. 63RD AVE.			MIAMI FL		
STD	PUIG, VICTOR A.			170 S.W. 63RD AVE.			MIAMI FL		
VD	PENALVER	, RAFAEL A.		1101 BRICKELL AVE #1700			MIAMI FL		
VM	FONKE, CAROLINA (MULKAY)			224 GRAYLYNA PLACE			FAYETTEVILLE NC		
D	FONKE, JEROME			224 GRAYLYNA PLACE			FAYETTEVILLE NC		
						01/22/0301087002 **150.00			
8. Name and Address of Current Registered Agent						9. Name and Address of New Registered Agent			
					Name	Name			
PUIG, IRENE N					Street Address				
170 SW 63 AVE MIAMI FL 33144					Suite Ant # Et	Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc.			
niu iiii 1 E 00 177					Suite, Apt. #, Et	.			
					City		State F L	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 o		CICINA			QUIRED		Date (8/2003	

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 filling 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.

REGISTERED AGENT MUST SIGN

Fene N. Puig 1/18/03



v.i.p. international travel inc.





January 18, 2003

Florida Department of State, Division of Corporations, P.O. Box 6327 Tallahassee, Fl. 32314

Re: V.I.P. International Travel, Inc Reinstatement of Corporation

Dear Sir or Madan:

I am very surprised to receive your Notice of Administrative Disolution of our corporation, V.I.P. International Travel, Inc.

I did not receive the form for filing the annual report (uniform Business report) – as we normally do each year. As you can see from your records we have always filed the annual report in a timely basis since we opened our business in 1982.

We hereby request that you reinstate the corporation and accept the enclosed check in the amount of the standard fee.

Ours is a small family business and we are hurting..

My husband and business partner, Victor Puig, suffered a massive stroke on July 4th, 2002 in Charleston, South Carolina and he was hospitalized for three months. He is presently undergoing therapy.

Although I am certain that I did not receive the annual report form that you normally send us, it is possible that with all the difficulties we have encountered, said form could have been misplaced in our office.

In any event, I hereby submit the Application for Reinstatement and request that you please waive the penalties and accept the standard renewal fee.

Please, feel free to call me if you have any questions.

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