

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

03 OCT 31 AM 9 09

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P00000085917**

1. Corporation Name

DIAMOND INTERNATIONAL PROPERTIES, INC.

Principal Place of Business

Mailing Address

3025 N OCEAN BLVD
 FT. LAUDERDALE FL 33308

3025 N OCEAN BLVD
 FT. LAUDERDALE FL 33308



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

4. Date Incorporated or Qualified To Do Business in Florida

09/08/2000

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

NOT APPLICABLE

Not Applicable

Zip Country

Zip Country

CERTIFICATE OF STATUS DESIRED

\$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	LAWAND, KYRA - REMOVE	1412 NE 53 CT	FT. LAUDERDALE FL 33334
D	LAWAND, ANTHONY	1412 NE 53 CT. CHANGE 3025 N. OCEAN BLVD	FT. LAUDERDALE FL 33334-33308
D	ADD ALAN WINSLOW	3025 N. OCEAN BLVD	FT. LAUDERDALE, FL 33308
<p>REINSTATEMENT 03 900024188629 10/28/03 01013 027 **150.00</p>			

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

LYNN, BRYAN
 TWO SO UNIVERSITY DR
 215
 PLANTATION FL 33324

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]

REGISTERED AGENT MUST SIGN

Date **Oct. 21, 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 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]

ANTHONY LAWAND Oct. 21, 2003 954-6086969

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (7/03)

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Nov.7, 2003

To: Dept. of State
Div. of Corp.

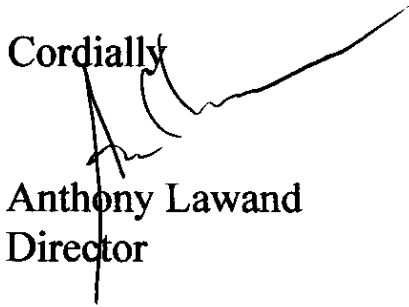
Re: Diamond International Properties

Subject: Reinstatement

To Whom It May Concern:

Please accept this request to waive the reinstatement fee due to the fact I was out of the country and never received my UBI which was required to file. As per our several phone conversations with representatives of your Dept. I resubmit the application.

Cordially


Anthony Lawand
Director