

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 NOV 27 PM 3:15

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P93000079128**

1. Corporation Name

PAN OCEAN INTERNATIONAL, INC.

Principal Place of Business

10200 NW 25TH STREET
 SUITE 210
 MIAMI FL 33172

Mailing Address

11903 S.W. 77TH TERRACE
 MIAMI FL 33183

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



800009240528
 11/27/02--01054--014 **150.00

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

11/09/1993

5. FEI Number

65-0449269

Applied For

Not Applicable

6. 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
P	DADLANI, DEEPAK V.	11903 S.W. 77TH TERRACE	MIAMI FL
T	DADLANI, NEETU	11903 SW 77TH TERRACE	MIAMI FL

8. Name and Address of Current Registered Agent

DADLANI, DEEPAK V
 11903 S.W. 77TH TERRACE
 MIAMI FL 33183

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 _____

CR2ED40 (8/02)

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 REQUIRED

REGISTERED AGENT MUST SIGN

Date 11/21/02

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

11/21/02

November 13, 2002

To: Florida Department of State
Re: Pan Ocean International, Inc
Document # P93000079128

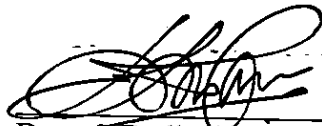
Request for waiver of reinstatement fee

To Whom It May Concern:

We are requesting a waiver of the reinstatement fee as we did not receive the prior two Uniform Business Report notices.

Enclosed is the completed application for reinstatement, the \$150 fee and the letter.

Thank you,


Deepak Dadlani,
President