er said 10fZ b "morney"

| | PLEA | ASE READ | ALL INST | RUCTIONS | SBEFORE | JOMPLETII = | NG LF | 15 FORM. | | |
|---|-----------------------------------|----------|---|---|-----------------------|---|------------------------|--------------------|--------------------------------|---------------------|
| CORPORATION REINSTATEMENT | | | FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS | | | O4 MAY 10 PM 5: 43 SECRETARY OF STATE TALLAHASSEE, FLORIDA | | | | |
| DOCUMENT # P99000025725 1. Corporation Name | | | | | | - | - (- / 1/1 / 1 | (SOLE) LEGIU | UA | |
| ESTATE FIELD GROUP INC | | | | | | 20 05/20 | 0 00 1/04 | 369675 01061027 | 942 **600. | .00 |
| 2. Principal Office Address 165 GOLDEN BEACH DRIVE | | | 3. Mailing Office Address 165 GOLDEN BEACH DRIVE | | | REINSTATEMENT | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | 4. Date Incorporated or Qualified To Do Business in Florida-3/22/99 | | | | |
| GOLDEN BEACH Zip Country | | | City & State GOLDEN BEACH Zip Country | | nirv | 5. FEI Number 65-090415 | 1004457 HT | | | ed For pplicable |
| 33160 | USA | - | 33160 | US | • | 6. CERTIFICATE | OF STATU | | Additional Fe Certificate o | |
| BENHAMOU, GILBERT Street Address (P.O. Box Number is Not Acceptable) 165 GOLDEN BEACH DRIVE Suite, Apt. #, Etc. City GOLDEN BEACH State 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 | | | | | | | | | | CR2E081 (01/04) |
| 9. Names | and Street Addresse | | | | orations must list at | east 3 directors) | | | - | - |
| Titles | Name of Officers and/or Directors | | | Street Address of Each Officer and/or Director | | | City / State / Zip | | | |
| PSTD | BENHAMOU, GILBERT | | | 165 GOLDEN BEACH DRIVE | | | GOLDEN BEACH, FL 33160 | | | |
| VV | BENHAMOU, FRANCE | | | ELETE | | | | | | |
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| | <u> </u> | | | | | | | | | |
| 10. I certify that I am an officer or director or the ecceler 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. SIGNATURE: SIGNATURE AND TIPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # | | | | | | | | | | |

CG Accounting Corporation

4101 Ravenswood Road., Suite 111, Fort Lauderdale, FL 33312 (954) 3274617 Fax (954) 3274618

April 22, 2004

Deptartment Of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

> Re: Estate Field Group Inc. # P99000025725 UBR - 2001, 2002, 2003, 2004

Dear State of Florida Representative,

We are the accountants for the above named taxpayer. This corporation never received their 2001 - 2004 UBR/Annual Report in the mail. We sent an e-mail and received a response (copy enclosed) to advise us how to proceed.

We are submitting the application together with the \$600 fee ($$150 \times 4$). We appreciate the abatement of the late fee.

If any additional information is needed, please contact us.

Very truly yours,

David Goldis

DTG/cb