PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| REINSTATEMENT | | | | | Se | DEPARTMENT OF STATE Secretary of State SION OF CORPORATIONS | | | | | 04 P | | .EC AMII: | 42 | | |
|---|--|--|-------------------------|------------|---------------------------|--|--|--|---|--|--------------------|------------------|---------------------------|---------------------------------|----------------------------|--------------------------|
| DOCUMENT # S80742 1. Corporation Name OPUS INSTRUMENTS, Inc. | | | | | | | | | | TALLAHASSEE, FLORIDA | | | | | | |
| 2. Principal Office Address 3. Mailing Of 361 COCONUT CIRCLE 361 COCO | | | | - | ffice Address ONUT CIRCLE | | | | 3 - 3 | - 6 | 4 6 | 1049 | 3 O | 03 /50 | | |
| Suite, Apt. #, etc. Suite, Apt. #, etc. | | | | pt. #, etc | etc. | | | | 4. Date Incor | porated or | Qualified | 010 02 09-17- | _ | 750 00 | | |
| 1 - | | | | City & S | STON FL | | | | | 5. FEI Number Applied For Not Applicable | | | | | | |
| ^{Zip} 33326-3 | 3320 | Country USA | | | Zip 33326 | 5-3320 | o | Country USA | | | 6. CERTIFICAT | E OF STATI | JS DESIRED | S8.75 Ad for a C | Iditional F Certificate | ee required of Status |
| | 7. Name and Address of Current Registered Agent Name ARNALDO GHERSI Street Address (P.O. Box Number is Not Acceptable) 361 COCONUT CIRCLE Suite, Apt. #, Etc. City State Zip Code | | | | | | | | | | | | | | | |
| 8. I, being Signature of Registered | ıf | | od apoint o | ba_ | ove named | | | | and accept th | ne ob | oligations of sect | FL ion 607.05 | 05 or 617.0 | 6-3320 0503, F.S. /16 0 4 | | CR2E081 (01/04) |
| 9. Names Titles | and Street A | and Street Addresses of Each Officer and/or Director (Flor Name of Officers and/or Directors | | | or (Floric | rida nonprofit corporations must list at least 3 of Street Address of Each Officer and/or Director | | | | st 3 directors) City / State / Zip | | | | | | |
| CEO | ARNALDO GHERSI | | | ; | 361 COCONUT CIRCLE | | | | *************************************** | WESTON FL 33326-3320 | | | | | | |
| | PER | | | | | 10 60 | GIATEMENT 03-04 | | | | | | | | | |
| | | | | | | | | | | | · | | | | | |
| this rei | nstatement a by the corpora application is | pplication, ation have s true and | the reason been paid | for dis | solution have names of | been e ndividua nall have | eliminated als listed of the sam | the corpor on this form the legal effe | rate name satis do not qualify act as if made u | sfies for a inder | , <u>i</u> | s of sectio | n 607.0401 i 119.07(3) | or 617.0401, I | F.S., that a commation i | all fees ndicated |

ARNALDO GHERSI 361 COCONUT CIRCLE WESTON, FL 33326

BY FIRST CLASS MAIL

March 16, 2004

Registrations/Qualifications Section Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee FL 32314

Re: OPUS INSTRUMENTS, INC.

S80742

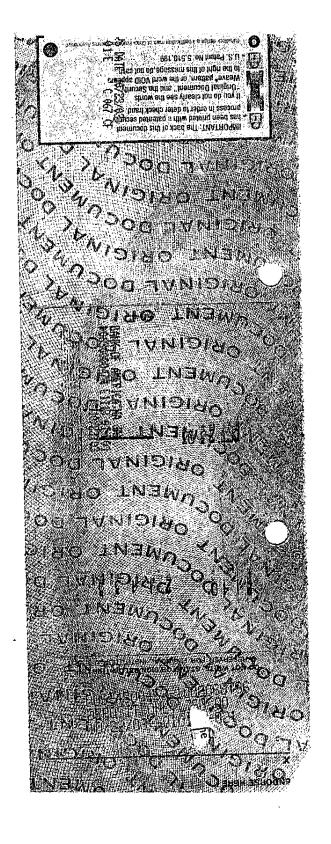
Dear Sir/Madam,

In reference to your letter to us of March 4, 2004 (attached hereto for ease of reference), I am enclosing a completed and signed Reinstatement Form. Per our telephone conversation of yesterday with one of the document specialists of your division, we understand that the Reinstatement fee has already been delivered to you, along with this year's Annual Fee. We ask that you please refer to the attached copies - our check number 4131, in the amount of \$750 (which instrument was deposited by you 10/22/03), and Arazoza & Fernandez-Fraga, P.A Trust Check number 3927, in the amount of \$150.

At your earliest convenience, please process the enclosed Reinstatement Form. For any questions related to the contents of this communication, please call me at (305) 724-9065.

Singerely yours

Arnaldo Ghersi



| 3927 | \$ **150.00 | | | |
|---|---|---------------------|--|--|
| NORTHERN TRUST BANK OF FLORIDA, N.A. CORAL GABLES, FL 33134 63-965/660 | | | ## 5 1 6 0 0 0 6 5 9 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| ARAZOZA & FERNANDEZ-FRAGA, P'A ATTORNEYS AT LAW TRUSTACCOUNT | PAY TO THE DEPARTMENT OF STATE GOOD HUNDER OF STATE GOOD HUNDER FIFTY and 00/100********************************* | DEPARTMENT OF STATE | SOREL KOHN RE OPUS INSTRUMENTS, INC. MEMO 399 27 " "OBBOO9B50" | |
| | 07884884+008+ s18+ 97.0 | OWI TIUTALI OCOS: | ≥ veet o.,. | |