	PLEASE READ	ALL INS	TRUCTIONS	BEFORE (COMPLET	ING THIS FOR	RM.	
AP	PLICATION	FLORIDA	A DEPARTME	NT OF STATE				
FOR Jim Smith						- g i		
REINSTATEME Secretary of State					FILED			
DIVISION OF CORPORATIONS					00.40			
DOCUMENT # F0100002692					02 NOV -5 PM 1:36			
1. Corporation Name ERGORESEARCH USA INC.					SECRETARY OF STATE			
					SECRETARY OF STATE TALLAFIASSEE, FLORIDA			
Principal Place of Business Mailing Address					1			
1751 RICHARDSON SUITE 3418 1751 RICHARDSON SUITE 3418								
MONTREL QC (CANADA) H3K 1G6 MONTREL QC (CANADA) H3K 1G6							EKIN BANKO HIAND BAKKO HONIO HIBA 1661	
							l.	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.								
New Principal Office Address, If Applicable New Mailing Office Address, If Applicable					4. Date Incorporated or Qualified To Do Business in Florida 05/18/2001			
Suite, Apt. #, etc.					To Do Busi	ness in Flonda	05/18/2001	
City & State City & State					5. FEI Numbe	APPLIED FOR	Applied For	
Hollywood FL Hollywood				_ -	6		Not Applicable	
^{zig} ろろ(019 Country 1) 874	3301	G Count	ry) S/14		OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status	
7. Names	and Street Addresses of Each Officer and/		rida nonprofit corpor		st 3 directors)		To a destinate of Status	
Title(s) Name of Officers Street Address of Each								
1	3			ficer and/or Director			/ / State / Zip	
CP	CP LAFERRIERE, ALAIN 3475			175 DE LA MONTAGEN APT 425		MONTREL QC (CANADA) H3G 2A4		
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		_			117 007 (be originate	. **130.00	
	9 None and Sald			1				
8. Name and Address of Current Registered Agent Name					9. Name and A	ddress of New Register	red Agent	
NATIO	NAL CORPORATE RESEARCH,LTD., I	NC.						
103 N. MERIDIAN STREET Street Address (P.					O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32301 Suite, Apt. #				Suite, Apt. #, Etc.	C.			
		\sim	\circ	City			tate Zip Code	
,)			F	=L	
10. I, being appointed the registered agent of the above names corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.								
Signature of Registered Agent SIGISTERED AGENT MUST SIGN Date								
								11. I certify t
11. I certify that I am an officer or director or the receiver or trusted 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.								
	1 Na.	11/						
CICAL MATHER TOTAL TOTAL								
SIGNATURE: SIGNATURE: DISTRIBLED (by 107 30550255/7)								
	SIGNATURE AND TYPED OR PRINT	TED NAME OF SIC	GNING OFFICER OR D	RECTOR		Date	Daytime Phone #	



ERGORESEARCH USA INC.

Expert-Fit technology network - Medical, Sport & Retail - Custom foot orthotics - Custom insoles - Prefab insoles - Footwear - Computerized manufacturing process over the Internet - Mobile clinic -

usa@ergoresearch.com

www.ergoresearch.com

2501 South Ocean Drive, suite 523 Hollywood, FL 33019

> Tel.: 954.921.7109 1.877.990.FOOT

Hollywood, November 1, 2002

To who it may concern,

I have received a document from the Florida department of state saying that Ergoresearch USA was in dissolution or revocation.

I never have receive any notice concerning this regard and I am asking to verify the address where you are sending paper to us:

Our office address is:

2501 South Ocean Drive, suite 523 Hollywood, FL 33019

I am asking you to wave the fees for restoration based on the information I just told you.

I am available to discuss this issue and can be reach at 954-921-7109 or 305-502-5517.

Thank you,

Best regards,

Alain Lafertiere