PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT Secretary of State Division of Corporations	FILED 03 MAR -3 AM 9:30
DOCUMENT # FO1000004565. 1. Corporation Name 1. T. PAIATIONIA)	SECRETARY OF STATE FALLAHASSEE, FLORIDA
1. Corporation Name HT INTERNATIONAL	·
CRWING, INC.	
2. Principal Office Address P.O. BOX 2767	
Suite, Apt. #, etc.	4. Date Incorporated or Qualified To Do Business in Florida August 38. Zool
City & State Titusuille, FL. Titusuille, FL.	5. FEI Number E N # Applied For 37-1412-7-6-111412 Not Applied For
Zip Country Zip Country 32796 BREVARD 32781- Brevard	6. CERTIFICATE OF STATUS DESIRED Cora Carifficate of Status
7. Name and Address of Current Registered Agent	
Name MARJIN DOSEPH Street Address (P.O. Box Number is Not Acceptable) 870 N CARPENTER RA Suite, Apt. #, Etc.	900013342368 03/03/0301069016 **300.0
City Titusville	State Zip Code FL 33946
8. I, being appointed the registered agent of the above name for poration, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent Date Date	
9. Names and Street Addresses of Each Officer and or Director (Florida nonprofit corporations must list at lea	
Titles Name of Street Address of Each Officers and/or Directors Officer and/or Director	
P.D Marvin N Joseph 870 N Carpenter T	2d Titusu: 11e. Fl. 32796
V.P. Isabel M Machado - 951 Belmout D.R.W.f	salm beach F1. 33415
C.E.O JUAN A JOSEPH 951 Belmont D.R.	W. Palm beach .F1.33415
TR Marvin N Joseph 870 N carpenter	Rd Titus ville- F1. 32796
Sct Sharon J JOSEPH 870 N Carpenter	Rd Titusville Fl. 32796
10. I certify that I am an officer or director or the receiver er 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 at my signature shall have the same legal effect as if made under oath. SIGNATURE: SIGNATURE: Daytime Phone #	



870 NORTH CARPENTER ROAD, TITUSVILLE FL, 32796 TEL: (321) 267-4871, TELE FAX: (321) 383-1014

FEBRUARY 28, 2003

Division of Corporations P.O. BOX 6327 Tallahassee, Florida 32314

REF: HT INTERNATIONAL CREWING, INC.

Ref: Number: F01000004565

DEAR SIR OR MADAM:

Please be advised that HT INTERNATIONAL CREWING, INC. Did not Receive a UNIFORM BUSINESS REPORT last year. We apologize for the inconvenience We might have cost by not reporting this incident earlier., THANK YOU for your assistance In this matter; if you have any inquiry on this matter please feel free to contact us at THE Following numbers:

(321)-383-1014 or E-mail address "D3RMR@ AOL.COM

OSEPH

HT INTERNATIONAL CREWING, INC.

Mailing address: P.O. Box. 2167 Titus ville, PL. 32781