	-	·	<u> </u>	1. Jul.	the property of		naar at mark	21/11/2004	
PLEASE READ ALL INSTRUCTIONS BEFORE C APPLICATION FLORIDA DEPARTMENT OF STATE						ING THIS FOR	M:		
REINSTATEMENT			Sandra B. Morthom Secretary of State VISION OF CORPORATIONS		·	FILED			
DOCUMENT # F9500002913 1. Corporation Name					96 NOV -4 PM 4:09				
KEW INDUSTRY U.S. INC.					SECRETARY OF STATE TALLAHASSEE. FLORIDA				
Principal Place of Business Mailing Addre			ss						
HABSUND. (		HABSUND:	DENMARK-	correction below.			<b>⊘</b>	A 11/16	
2. New Principal Office Address, If Applicable 3. New Malkin 1500 N. Belicher Pd. 500 Suite, Apt. #, etc.			N. Beich	ice Ariresa if Applicable 4. Date Incorporated or Q To Do Business in Flori			alified da 06/14/1995		
City & State	vater FL		water 1	FL.	5. FEI Number	59-3312234	<del> </del>	pplied For ot Applicable	
7. Names ar	nd Street Addresses of Each	<del></del>			st 3 directors)	OF STATUS DESIRED			
Title(s)	LARSEN, JOHN			Street Address of Each Officer and/or Director  3 (Do NOT Use Post Office Box Numbers)  C/O NEW INDUSTRIA/S, INDUSTRIAV			City / State / Zip		
ST	DAVID WEE	1500 N BEIGHBIE ROMO C/O KEW INDUSTRIKY			CLEMEWATER DK-9560 HADSUND	R	34618		
.0	SOREN LAKSEN LERSKOV, NO.			1500 N BELCHEIR ROAD ON HICHTHEAS, KONDENS INTOR			S EL	34.M5	
D	HOLST, ERIK	6/0 KEW NOUSTHING MOUSTHKY			-SK450 HADSUND, CLEARLWATE		3168		
D	BARSLUND, HANS			1500 N BELLINGE ROWD			be fi	27.618	
-9	D TRAMPE, PETER C			<del>a/0, kogens ni</del>	TORV	DK-1018 GCPEWW	CENK DEW		
8. Name and Address of Current Registered Agent Name					9. Name and /	Address of New Register	red Agent		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				Street Address (F	O. Box Number	9 <b>0002</b> 00	1793	2 8 017 8	
PLANT	ATION FL 33324		Suite, Apt. #, Etc.	*****313.00 *****313.00			13.00		
10. I, being appointed the egistered agent of the above named corporation, am familiar with and accept					bligations of Secti		State Zip Code		
Signature of Registered A	TOTAL NO	ONAM		MRED		Date 10-2	8-96.		
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes 🔀 No 🗌 (See other side for information on intangible tax.)									
12. I cortify 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 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 logal effect as if made undor oath.									
SIGNATURE: SIGNATURE AND CHARLES OF DEVELOP OF DEVELOP									