PLEASE READ A	LL INSTRUCTIONS E	BEFORE C	COMPLETING THIS FORM. $ ho$	21
APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTAN Kathe ne Ha Secretary of Sta		FILED	7
DOCUMENT # F96000001179		99 FEB 25 Pil 4: 54		
1. Corporation Name SILVER DESIGN GROUP, INC.			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 1274 S.W. 16TH STREET BOCA RATOO, FL. 33406	Mailing Address 1274 S.H. 1(0TH S BOCA RATOU, FL.	33486		
If above addresses are incorrect in any way, line thro New Principal Office Address, If Applicable	ugh incorrect information and enter of 3. New Mailing Office Address, If A		4 Date Incorporated or Qualified To Do Business in Florida	100/
Suite, Apt. #, etc.	Suite, Apl. #, etc.			Applied For
Crty & State	City & State		75-25225185 88.75 Addition	Not Applicable
Zip Country 7. Names and Street Addresses of Each Officer and/o	Zip Country		CERTIFICATE OF STATUS DESIRED	ate of Status
P GREICHEN PARR-S SHEWEN SILVER B. Name and Address of Current F	3 (DO NOT USE 1274 S.A BOCA RA 1274 S.A	1.16TH &	Numbers) T- SS406 POCA RATON, FI	.33466 1
STREED SILVER 1274 S.W. 1(eth STREET BOCA RATION, FL. 33446		Name Street Address (F	(P.O. Box Number is Not Acceptable)	
A	/h	City	State Zip Cod	9
10. I, being appointed the registered agent of the above dafted corporation, am familiar with and accept the Signature of Registered Agent MUST SIGN			biligations of Section 607 0505, F.S. Date 23 TERRORY	1999
11. This corporation owes the current year Intangible Personal Property Tax due June 30.			(See other side for inform on intangible tax.)	nation
12. I certify 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 filing this reinstalement 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: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date				

23 February 1999

Silver Design Group, Inc. 1274 S.W. 16th Street Boca Raton, FL. 33486 561-395-1680

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Re: Silver Design Group, Inc. Document No. F96000001179 Request For Reinstatement

Enclosed please find our corporation's Application For Reinstatement as a foreign corporation qualified and authorized to transact business in Florida.

In an attempt to file for a fictitious name for our d.b.a., SweetChip au chocolat, we were informed that our corporation status had been revoked due to failure to file an annual report for the years 1997 and 1998. We had not performed business after our initial filing for corporate status in 1996. Our plans are to begin our business at this time. Our failure to file is only the result of not receiving the proper paperwork from the State. We can only presume that the documents were sent to our previous address in Texas as noted on your computer printout, attached, but not forwarded to our current address.

We have enclosed a check for \$465.00 for the annual report filing fees for 1997, 1998 and 1999. In lieu of the \$1050, reinstatement fee, we would appreciate your accepting this payment and waive the penalties.

We apologize for any confusion or additional work this may have caused your office, but hope that as a small business in Florida, we could be given the opportunity at this time, to invest the \$590. savings back into our company.

We look forward to your expeditious handling of this request so that we can reissue our fictitious name request for SweetChip to your office in a timely manner.

Thank you in advance for every consideration.

Steven Silver Vice President

Sinderely.