PLEASE READ ALL INSTRUCTIONS BEFORE OF STATE Sandra B. Mortham Secretary of State		NT OF STATE tham state			
DOCUMENT # F9700003281 1. Corporation Name		RATIONS	SECRETARY OF STATE FALLAHASSEE, FLORIDA		
BLUMEX USA INC					
Principal Place of Business Mailing Address				a livur ivide eluk sant	
145 HOOK CREEK BLVD. STE C5C VALLEY STREAM NY 11581 / / 145 HOOK CREEK BLVD. STE C5C VALLEY STREAM NY 11581					
If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable			ncorporated or Qualified		
Suite, Apt. #, etc.			To Do Business in Florida 06/24/1997		
City & State	City & State		umber 13-3326645	Applied For Not Applicable	
Zip Country	Zip Country	, 6. CERTII	FICATE OF STATUS DESIRED (\$8.75 Add for a C	Iditional Fee required ertificate of Status	
7. Names and Street Addresses of Each Officer and/					
Title(s) Name of Officers Street Address of Eac Officer and/or Directors Officer and/or Directors Officer and/or Directors Office Box 1 (Do NOT Use Post Office Box 1		icer and/or Director	City / State / Zin		
CP VAN DER VELDEN, PIETER A PAGELAAN 27 1906 CE		906 CRT	LIMMEN HOLLAND		
VST VAN DER VELDEN, DOMINICUS A DUINWEG 2 19014 ML		14 ML	BAKKUIN HOLLAND		
			-12/09/9801072025 *****150.00 ****150.00		
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
			Pr 15%	5	
8. Name and Address of Current Registered Agent Name			and Address of New Registered Agent	t	
BLUMEX MIAMI Street Address (P			mber is Not Acceptable)	CR2E040 (9/9	
7220 NW 36TH ST MIAMI FL 33166 Suite, Apt. #			ic.		
City				Code	
10. I, being appointed the registered agent of the abo	verbamed corporation, am familiar wif	th and accept the obligations of	Section 607.0505, F.S.		
Signature of Registered Agent Resistered Agent Resistered Agent Resistered Agent Resister	GISTERED AGENT MUST SIGN	<u>IIRED</u>	Date		
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No No (See other side for information on intangible tax.)					
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 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.					
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					



Blumex USA Inc.

IMPORT/EXPORT CUTFLOWERS

Airport Industrial Office Park 145 Hook Creek Blvd., Building C5C Valley Stream, NY 11581

Tel: (516) 561-6520 • Sales Fax: (516) 561-6524 • Admin. Fax (516) 561-1041

November 25, 1998

Florida Department of State Division of Corporations P.O. Box 3627 Tallahassee, Florida 32314

Re: Blumex USA, Inc.

EIN#13-3326645

Document #F97000003281

To Whom It May Concern:

We are a New York corporation doing business in Florida under the name Blumex Miami. Our effective date qualified to do business in Florida was June 24, 1997. We are in receipt of your notice of Administrative Dissolution or Revocation effective October 16, 1998. Until receiving the above mentioned notice, we had not received any prior notification to file a 1998 Corporation Annual Report.

Please accept this letter as a request for a waiver of the \$600.00 reinstatement fee, as 1997 was our first year operating in Florida, and we were not informed as to the filing requirement of an Annual Report. In the meantime I am enclosing a check in the amount \$150.00 to cover our second year in business.

Thank you in advance for your courtesies.

An office of Assessed

and the bu

Blumex USA Inc.

Encs.