PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	2006 JUN 19 PM 2: 47 SECRETARY OF STATE TALLAHASSEE. FLORIDA
DOCUMENT # F98000 1. corporation Name INVESTMENT CON ENTER PRISES, IN		
2. Principal Office Address 4101 EAST 11th AVE	3. Mailing Office Address A101 EOST 11Th AR	CR2E081 (8/05)
City & State Higheoh, FL Zip 33013 Country USA	City & State Hiokon, FL Zip 33013 Country USA	4. Date Incorporated or Qualified 14 - 14 - 1998 5. FEI Number 2013071 Applied For Not Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent Name Avool O O O SOOTEE33255 Street Address (P.O. Box Number is Not Acceptable) Avc Suite, Apt. #, Etc. City 1 120 60h		
8. 1, being appointed the registered agents the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN Date		
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Titles Name of Street Address of Each City Cours / 7/2		
Titles Officers and/or Directors Pd AvnOldo OIII		
B 6/20/04		
STATE OS DL		
10. I certify that I am an officer or director or the receiver or trustee empowared 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 earlistics 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 quality for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and imposing nature shall have the same legal effect as if made under eath. SIGNATURE: SIGNATURE Date Date		

INVESTMENTS CONSULTANTS ENTERPRISES, INC.

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

ATTN: TYRONE SCOTT

AS PER OUR PHONE CONVERSATION I AM SENDING TO YOU THIS LETTER OF EXPLANATION AND THE UBR FORM ALONG WITH A CHECK TO PROPERLY UPDATE MY CORPORATION I FURTHER STATE THAT I DID NOT RECEIVE THE NOTICES FOR 2003 FROM YOUR OFFICE NOR DID I GET ANY CORRESPONDECE FROM MY BANKING INSTITUTION REGARDING THE PROBLEM WE HAD WITH OUR CHECK. I WOULD LIKE TO RESOLVE THIS ISSUE AS SOON AS POSSIBLE AND PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

I HAVE A NEW MAILING ADDRESS PLEASE MAKE A NOTE OF IT.

CORDIALLY

ARNOLDO ULLOA

PRESIDENT