PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION **FOR** REINSTATEMENT



FLORIDA DEPARTMENT-OF STATE Glenda E. Hood

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F99000003597

1. Corporation Name

OUT2.COM, INC.

Principal Place of Business

631 US HWY 1

SUITE 411

NORTH PALM BEACH FL 33408

2. New Principal Office Address, If Applicable

Mailing Address

631 US HWY 1 SUITE 411

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

NORTH PALM BEACH FL 33408

3. New Mailing Office Address, If Applicable

 Date Incorporated or Qualified To Do Business in Florida 07/13/1999 9. Name and Address of New Registered Agent

FILED

03 DEC 23 PH 4: 37

SEGNETANT OF STATE TALLAHASSEE, FLORIDA

Suite, Apt.	#. eic.		Suite, Apt. #,	erc.		1	•	·
Cano, Apr. 11, otc.						5. FEI Number		Applied For
City & State City & State						65-0930318	Not Applicable	
Zip		Country	Zip		Country	6. CERTIFICATI		5 Additional Fee required or a Certificate of Status
7. Names	and Street Ad	dresses of Each Officer and	t/or Director (Flo	rida nonpro	fit corporations must list at lea	st 3 directors)		
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip	
CEO	LEONARD, ROBERT E			631 US HWY 1, STE 411			NORTH PALM BEACH FL 33408	
D	FROOMKIN, MICHAEL			631 US HWY 1, STE 411			NORTH PALM BEACH FL 33408	
Ð	- ADAMS, WILLIAM - Cabeen AL			631 US HWY 1, STE 411 631 US HWY 1, STE 411			NORTH PALM BEACH FL 33408- North Palm Basen FL 33408	
\$	HALL, DICK Bella Sala, Carmine			631 US HWY 1, STE 411			NORTH PALM BEACH FL 33408	
P	ANTHONY, SAM			631 US HWY 1, STE 411			NORTH PALM BEACH FL 33408	
D	Richard Hackins			631 us Hwg 1 Ste 411			N.PAlmBeach, FL 33408	

8. Name and Address of Current Registered Agent

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

amed corporation, am fan

ar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

10. I, being appointed the registered agent of the above

C T CORPORATION SYSTEM

PLANTATION FL 33324

1200 SOUTH PINE ISLAND ROAD

REGISTERED AGENT MUST SIGN

12/22/37

State

11. I certify that I am an officer or director or the receiver or thustee 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 urate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Signature of Registered Agent

INTER NAME OF SIGNING OFFICER OR DIRECTOR



December 18, 2003

Department of State Division of Corporations 409 East Gaines St. Tallahassee, FL 32399

#65-093-0318

To Whom It May Concern:

We did not receive the 2003 Annual Report/Uniform Business Report in the first place, so we were not given an opportunity to pay this. I will file the paperwork on this and we will expect it next year when it comes again.

Please waive the penalty and accept the enclosed payment of \$150 to reinstate Out2.com, Inc.

Thank you for your assistance in this matter.

Sincerely,

Karen Weston Out2.com, Inc.

561-863-7877

karenw@out2.com

N. Palm Beach, FL 33408

Fax: 561-863-8232