PLEASE READ ALL INSTRUCTIONS BÉFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		Katheri Secreta	A DEPARTMENT OF STATE Katherine Harris Secretary of State VISION OF CORPORATIONS		FILED 00 DEC -7 PM 5: 00				
DOCUMENT #F9900006460 1. Corporation Name					SECRETARY OF STATE TALLAHASSEE, FLORIDA				
	We're Ready To Assem	ble, Inc.							
2. Principal Office Address 3. Mailing C									
0001 D -1 T			Royal Lane			REINSTATEMENT			
Suite, Apt. #	#, etc.	Suite, Apt. #, etc. Suite 230	, etc.		4. Date Incorporated or Qualified			SP	
City & State)	City & State				To Do Business in Florida 12/14/99			
Irving,	, Texas	Irving, Tex	ıg, Texas			75-2838548 Applied Fo			
Zip 7506 3	Country U.S.A.	^{Zip} 75063	Country U.S.A.	-	6. CERTIFICATE	OF STATUS DESIF		itional Fee required rtificate of Status	
		7. Name and	Address of C	urrent Registere	d Agent				
	Name Capitol Corporate Services, Inc.								
·	Street Address (P.O. Box Number is Not Acceptable) 1333 North Duval St.					900003505889+-1			
	Suite, Apt. #, Etc.				-12/19/0001059020 ****750.00 ****75				
	City Tallahassee						Code 2303		
Signature of Registered	Agent F	ase, asst	r SIGN				7.0503, F.S.	»o	
9. Names	and Street Addresses of Each Officer a	nd/or Director (Florida nonpr			st 3 directors)		***		
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip			
Pres.	Richard J. D'Amico	2201	Royal 3	Ln., Ste.	230	Irving	TX 75063		
Secy.	Richard J. D'Amico	2201	Royal 1	Ln., Ste.	230	Irving,	TX 75063		
Treas.	Randy Walker	2201	Royal 1	Ln., Ste.	230	Irving,	, TX 75063		
Dir.	Richard J. D'Amico	2201	Royal 1	Ln., Ste.	230-	Irving	, TX 75063		
this rei	y that I am an officer or director or the reconstatement application, the reason for disby the corporation have been paid and the application is true and accurate, and my further. Richard J. D'Ar	solution has been eliminated e names of individuals listed rsignature shall have the san	i, the corporate on this form de	e name satisfies to not qualify for a	he requirements a exemption under oath.	of section 607.04	01 or 617.0401, F.S	S., that all fees nation indicated	

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR