

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PS/afj

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State

DIVISION OF CORPORATIONS

02-03 UBR

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 MAY - 2 AM 11:00

DOCUMENT # H32242

1. Corporation Name

INTERAMERICAN RESOURCES INC

2. Principal Office Address

103 N MERIDIAN ST
Suite, Apt. #, etc.

3. Mailing Office Address

4936 Yonge St
Suite, Apt. #, etc.
727

City & State

Tallahassee FL

City & State

Toronto ONT

Zip

32301

Country

USA

Zip

M2N 6S3

Country

CANADA

4. Date Incorporated or Qualified
To Do Business in Florida

FL010A

5. FEI Number

592682574

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$9.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

NATIONAL CORPORATE RESEARCH LTD., INC

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

103 N MERIDIAN ST

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

RA. Mr.

REGISTERED AGENT MUST SIGN

Date

April 30 2003

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|-----------|--------------------------------------|---|--------------------|
| Asst P | L. SKOLNIK | 250 BATHURST ST #1006 | Toronto ONT |
| | | | |
| | | | |
| | | | |
| | | | |
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10. 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 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

(L. SKOLNIK)

Date

April 30 2003 - 416-4103995

Daytime Phone #

CR2E081 (10/02)

5/2/03
aw



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INTER AMERICAN RESOURCES INC.

4936 Yonge Street
Suite 727
Toronto, Ontario
M2N 6S3

Telephone: (416) 410-3995
Facsimile: (416) 784-1529

May 1, 2003

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida
32399
U.S.A.

Attention: Pat Bailey, Accountant II

Dear Ms. Bailey:

As per our conversation of yesterday regarding re-instatement of our Company, please be advised that we did not receive a notice of a return cheque or dissolution order being issued after 60 days. We are new to public companies as Mr. Swarzman is ill and we are trying to cope as well as possible.

I will be enclosing copies of papers you faxed to me and a cheque for U.S. \$315.00. I thank you for your indulgence and help in this matter.

Thanking you in advance.

Sincerely,

Larry Skolnik

LS/ncj
Encls.