

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JUL -6 AM 11:26

DOCUMENT # J 22836

1. Corporation Name

TETRA PENTA HOLDINGS INC.

2. Principal Office Address

7562 ELLIS AVE.

Suite, Apt. #, etc.

E6

City & State HUNTINGTON
BEACH, CA

Zip

92648

Country

U.S.A.

3. Mailing Office Address

18685-A MAIN

Suite, Apt. #, etc.

#125

City & State HUNTINGTON
BEACH, CA

Zip

92648

Country

U.S.A.

REINSTATEMENT 96-04

4. Date Incorporated or Qualified
To Do Business in Florida

07/07/1986

5. FEI Number

20-1246094

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

UNITED CORPORATE SERVICES, INC.

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

9200 SO. DADELAND BLVD.

Suite, Apt. #, Etc.

SUITE 508

City

MIAMI

State

FL

Zip Code

33158

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

[Signature]
REGISTERED AGENT MUST SIGN

Date 7/2/2004

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
CH.	ROBERT C. ROY	2975 CARTIER	JAK AG7 LONGUEUIL QC, CANADA
S.T.	RUDOLF KRAUSE	7562 ELLIS AVE, E6	HUNTINGTON BEACH CA 92648 - U.S.A.
			200039085872 07/14/04--01005--028 **1950.00
			200039085872 07/14/04--01005--029 **8.75

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] RUDOLF KRAUSE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUNE 29TH, 2004

Date

Daytime Phone #

PH: (714) 330 - 3554

CR2E081 (10/02)