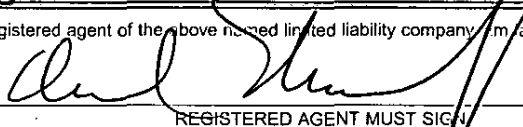


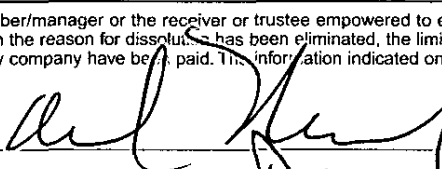
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED LIABILITY COMPANY REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		LO2000011579	
DOCUMENT # LO2000011579					
1. Limited Liability Company's Name Premium Energy Beverages LLC					
REINSTATEMENT 2003-2004					
2. Principal Office Address 6589 Pimento Dr			3. Mailing Office Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State Boynton Beach FL			City & State FLORIDA		
Zip 33437		Country USA		4. State/Country of Formation FL	
				5. Date Organized or Qualified To Do Business in Florida 05/13/2002	
				6. FEI Number 300030385743	
				7. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$5.00 Additional Fee required for a Certificate of Status	

8. Name and Address of Current Registered Agent	
Name DAVID MOSKOWITZ	
Street Address (P.O. Box Number is Not Acceptable) 6589 Pimento Dr	
Suite, Apt. #, Etc.	
City Boynton Beach	State FL Zip Code 33437

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.	
Signature of Registered Agent 	Date 3/10/04
REGISTERED AGENT MUST SIGN	

10. Names and Street Addresses of Managing Members/Managers			
Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
Pres	DAVID MOSKOWITZ	6589 Pimento Dr	Boynton Beach FL 33437

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. 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 of Managing Member/Manager 	Date 3/10/04 Daytime Phone # 561-7346362
Typed or printed name of signing Managing Member/Manager DAVID MOSKOWITZ	