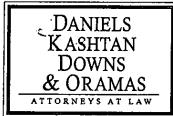
page 1013

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION	FLORIDA DEPARTMENT OF S Katherine Harris Secretary of State DIVISION OF CORPORATIONS	02 APR -5 AN IO: 26
DOCUMENT # しなら 1. Corporation Name	494	SECRETARY OF STATE TALLAHASOLE, FLORIDA
The New Boofe	ry, Inc.	
2. Principal Office Address 16590 S. DIXIE +	3. Mailing Office Address	800053080380/ -04/19/0201045007 ***1150.00 ***1150.00:::
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. Date Incorporated or Qualified To Do Business in Florida 10/26/1989
Miam, Florida	City & State	5. FEI Number 84793 Applied For Not Applied For
33157 Country U.S.	Zip Country	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent		
Michael Hama Street Address (P.O. Box Number is Not Acceptable)		
9330 S. W. 136th St. Suite, Apt. #, Etc.		
City Zio Code		
Miami, Florida 33176 FL 33176		
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 Date 3/1/02 REGISTERED AGENT MUST SIGN		
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 D	Street Addre rectors Officer and/	
PDT-Michael-Ha	ma 9370 5. W. [9	56th St. Miami, FT 33176
		96-02 4BR - **
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 Date Date Date Daytime Phone #		

Attachment

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RICHARD G. DANIELS MICHAEL F KASHTAN JOSEPH W. DOWNS, III JOHN E. ORAMAS ALBERT E. BLAIR NEIL P ROBERTSON WALLACE C. MAGATHAN

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LORNE E. BERKELEY
RICARDO J. MORALES-GOMEZ
DAVID S. HARRIS
WILLIAM T. BRADY, JR.
JOSEPH A. SORCE
JEREMY DANIELS
MADELYN S. LOZANO

REPLYTO: CORAL GABLES

March 1, 2002

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Fl. 32302-1500

To Whom It May Concern:

Please be advised that I am submitting this letter on behalf of my client, The New Bootery, Inc., a Florida corporation (FEI #650184793). On February 28, 2002, I spoke to an expense officer with your office regarding the corporate re-instatement of The New Bootery, Inc. In accordance with the instructions given to me by the Expense Officer, please accept the enclosed check of \$150 for corporate re-instatement of The New Bootery, Inc. along with a signed copy of the Corporation Re-Instatement Application.

In 1996, The New Bootery, Inc. failed to receive a Uniform Business Report for its annual dues and filing application. As such, the corporation, unbeknownst to the company's officers was administratively closed as a result of the corporation not having re-filed. Having this first brought to my attention, I am writing this letter to request that The New Bootery, Inc. be re-instated effective upon receipt of the enclosed check and Corporation Re-Instatement Application.

on the track of particle graph engineers.

Attachment

Should you have any further questions, please feel to contact my office.

DSH/sm Enc.

Dept.State