


2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # L80745		
1. Entity Name ANTIQUES DEALER'S SERVICE (USA) CORP.		

Principal Place of Business 4355 SW 72 AVENUE MIAMI, FL 33155	Mailing Address 4355 SW 72 AVENUE MIAMI, FL 33155
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

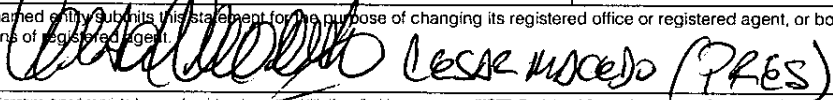
11172004 REIN-P CR2E098 (6/04)

4. FEI Number 65-0203470	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MACEDO, CESAR 4355 SW 72 AVENUE MIAMI, FL 33155
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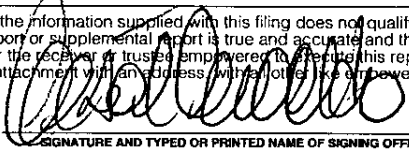
7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.	DATE 11/15/2004 (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$750.00 After January 1, 2005, Fee will be \$900.00	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MACEDO, CESAR 4355 SW 72 AVENUE MIAMI, FL 33155 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MELO, GUADALUPE M 4355 SW 72 AVENUE MIAMI, FL 33155 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PEREZ, OLGA 14309 HILLSIDE AVENUE JAMAICA, NY 11435 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100042925451 11/22/04--01036--015 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to file this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with a letter like an empowered.	
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE 11/15/2004 Daytime Phone # 3056680507

FILED
04 NOV 22 PM 4: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA





ADS ANTIQUES

Since 1989

Miami November 18, 2004.-

Division Of Corporations
Reinstatement Department
Tallahassee, Florida

Dear Sir.

At the reception of your letter offering the Reinstatement of Antique Dealer's Services (USA) Corp, FEI NUMBER : 65-0203470 we realize that the check # 3388 dated 2/16/2004, was never deposited and the regular fees where not paid for the current year.

We really apologize for the miss control and ask you to please accept our Ck # 5401, amount \$ 150.00 as payment for the currently due fees, and waive the late fee charges as an exception.

Thank you in advance for your understanding in a hard commercial year as it was 2004,

Sincerely,

Cesar Macedo
Ads Antiques