


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 MAR 29 AM 7:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M98396
1. Corporation Name
Zoetic, Inc.

2. Principal Office Address 4875 N. Federal Highway Suite, Apt. #, etc. 7th Floor City & State Fort Lauderdale, FL Zip 33308		Country US	
3. Mailing Office Address same Suite, Apt. #, etc. City & State Zip Country		Country	

300031350813
03/29/04--01083--003 **900.00

4. Date Incorporated or Qualified To Do Business in Florida 9/13/1988

5. FEI Number 65-0068760	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 Arthur R. Rosenberg	
Street Address (P.O. Box Number is Not Acceptable) 4875 North Federal Highway	
Suite, Apt. #, Etc. 7th Floor	
City Fort Lauderdale	State FL
	Zip Code 33308

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 Arthur R. Rosenberg Date 3/26/04
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 Directors	Street Address of Each Officer and/or Director	City / State / Zip
PSD	Edward J. Irwin	4875 N. Federal Hwy., 7th Floor	Ft. Lauderdale, FL 33308
VID	Beth Broderhausen	4875 No. Federal Hwy., 7th Floor	Ft. Lauderdale, FL 33308
VD	Arthur R. Rosenberg	4875 No. Federal Hwy., 7th Floor	Ft. Lauderdale, FL 33308

REINSTATEMENT 03-04

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: Arthur R. Rosenberg Date 3/26/04 954-772-5151
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E001 (07/04)