

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

7"5

APPLICATION  
*02/10/02*  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 DEC 10 PM 2:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P0000012108

1. Corporation Name  
PROGEMS USA CORP.

Principal Place of Business Mailing Address  
36 NE 1ST STREET, SEYBOLD BLDG. STE 942 MIAMI FL 33132  
36 NE 1ST STREET, SEYBOLD BLDG. STE 942 MIAMI FL 33132



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 4. Date Incorporated or Qualified To Do Business in Florida 02/03/2000  
5. FEI Number 65-0979213 Applied For Not Applicable  
6. CERTIFICATE OF STATUS DESIRED  \$8.75-Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	SUDARSKY, HARRY	36 NE 1ST ST, SEYBOLD BLDG, STE	MIAMI FL 33132

700009078437  
11/19/02--01028--002 \*\*158.75

*Biz/12*

8. Name and Address of Current Registered Agent  
SUDARSKY, HARRY  
36 NE 1ST STREET, SEYBOLD BLDG.  
STE 942  
MIAMI FL 33132

9. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, Etc.  
City State Zip Code  
FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.  
Signature of Registered Agent *[Signature]* REGISTERED AGENT MUST SIGN  
Date 11/15/02

11. 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]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date 12/03/02 (305) 373-7307  
Date Daytime Phone #

CR2E040 (8/02)



progems USA Corp. | Diamond Importers

Tel 305.373.73.07 | 305.373.73.08 | Fax 305.373.73.09

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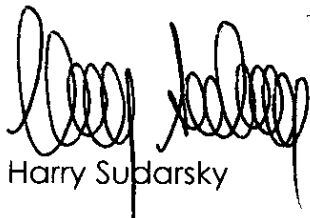
November 14, 2002

State of Florida  
Department of State

To whom it may concern:

This letter is regarding the reinstatement of Progems USA Corp. Because we have not received any notice during the year 2002, we are sending a check for the amount of \$ 158.75 Please send us a certificate of status, if you have any questions you can contact us at 305-3737307 and ask for Harry Sudarsky.

Thank you for your time and consideration,



Harry Sudarsky