PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION FLORIDA DEPARTMENT OF STATE Jim Smith REINSTATEMENT 02 OCT 21 PM 12: 42 Secretary of State DIVISION OF CORPORATIONS SECRETATY OF STATE TALLAHASSEE. FLORIDA DOCUMENT # POD-00001627つ 1. Corporation Name MESH CORPORATION 2. Principal Office Address 3. Mailing Office Address 2302 NW 71ST PLACE 2302 NW 71ST PLACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. Date Incorporated or Qualified To Do Business in Florida 02-10-2000 City & State City & State____ GAINESVILLE, FL 5. FEI Number **GAINESVILLE** 59-3632601 Zip Country Zip Country \$8.75 Additional Fee required for a Certificate of Status 32653 USA FL 32653 CERTIFICATE OF STATUS DESIRED [7. Name and Address of Current Registered Agent MABEL E. SILVA 80000848669 .0/21/02--0108 Street Address (P.O. Box Number is Not Acceptable) 2302 NW 71ST PLACE ****150.00 ****150.00 Suite, Apt. #, Etc. Zip Code State **GAINESVILLE** 32653 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 OCT-15-02 Registered Agent 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
P/VR.	OLMEDO D. HERNANDEZ	4531 NW 28TH TERRACE	GAINESVILLE, FL 32605
S/T	THOMAS UMLAUF	10555 NW 36TH LANE	GAINESVILLE, FL 32606
D	OLMEDO HERNANDEZ	4531 NW 28TH TERRACE	GAINESVILLE, FL 32605
VP/ M	GREGORY UMLAUF	10555 NW 36TH LANE	GAINESVILLE, FL 32606
10. I certify this re	y that I am an officer or director or the receiver or trustee e instatement application, the reason for dissolution has bee	mpowered to execute this application as provided for in chain eliminated, the corporate name satisfies the requirements	pter 607 or 617, F.S. I further certify that when filling

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:	Moulans
	SIGNATURE AND TYPED OF PRINTED NAME OF CICAMO OFFICER OF THE

10/15/02

Date

352-373-7731

Daytime Phone #

Applied For

Not Applicable

B--∩∩4

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: MESH Corporation Dissolution -- Annual Report Submission

To Whom It May Concern:

MESH Corporation of Gainesville, FL, FEI # 593632601, was administratively dissolved 10/04/02 for failure to submit the annual report. This discovery was made upon checking MESH Corp.'s status on the Sunbiz.com website.

I testify, as an officer of MESH Corporation, that the annual report form was never received by our company. Accordingly, I have attached the Corporation Reinstatement form along with a check for \$150 payable to the Department of State, representing the fee charged for annual certification.

If you have any questions please call me at 352-373-7731 or write me at my address supplied on the Reinstatement form.

Thank you for your time and consideration.

Cordially,

Mabel E. Silva

MESH Corporation