



PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| CORPORATION REINSTATEMENT | |  FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS | | FILED 04 MAY 20 AM 8:36 SECRETARY OF STATE TALLAHASSEE, FLORIDA | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|-----------------------------------|--|---------------------|--|--|--------|-----------------------------------|--|--------------------|--|---------------|------------------|---------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| DOCUMENT # P00000028813 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. Corporation Name The Window Pros of Florida, Inc. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. Principal Office Address 9600 Monroe Road Suite, Apt. #, etc. | | 3. Mailing Office Address 9600 Monroe Road Suite, Apt. #, etc. | | REINSTATEMENT 03-04 900036960379 05/20/04--01036--022 **300.00 | | | | | | | | | | | | | | | | | | | | | | | | | |
| City & State Charlotte NC Zip 28270 Country Mecklenburg | | City & State Charlotte, NC Zip 28270 Country Mecklenburg | | 4. Date Incorporated or Qualified To Do Business in Florida 3/00 5. FEI Number 59-3636727 Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7. Name and Address of Current Registered Agent Name: Corporation Service Company United States Corporation Company Street Address (P.O. Box Number is Not Acceptable) 129 Hayes Street Suite, Apt. #, Etc. City: Tallahassee State: FL Zip Code: 32301-2535 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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: Susan P. Clark Date: 5/13/04 REGISTERED AGENT MUST SIGN | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Titles</th> <th>Name of Officers and/or Directors</th> <th>Street Address of Each Officer and/or Director</th> <th>City / State / Zip</th> </tr> </thead> <tbody> <tr> <td></td> <td>Michael Mason</td> <td>9600 Monroe Road</td> <td>Charlotte, NC 28270</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> | | | | | | Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip | | Michael Mason | 9600 Monroe Road | Charlotte, NC 28270 | | | | | | | | | | | | | | | | |
| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Michael Mason | 9600 Monroe Road | Charlotte, NC 28270 | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| 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)(l), 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: 5/13/04 (704) 847-2009 Daytime Phone # | | | | | | | | | | | | | | | | | | | | | | | | | |

The Window Pros

Working Miracles One Window at a Time.



May 14, 2004

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Document #P00000028813

To Whom It May Concern:

Please find attached a Corporation Reinstatement application for The Window Pros of Florida, Inc. This corporation was dissolved by "Admin Dissolution for Annual Report." Upon further inquiry, I was told the company was dissolved because the annual report for 2003 was never filed. This was never filed because the renewal was sent to our old address of 7081 Grand National Drive, Suite 101, Orlando, FL 32819. As of February 2002, the company moved to 2529 Silver Star Road, Orlando, FL 32804.

According to records, a change of address was submitted when the office moved from Grand National Drive to Silver Star Road, however, I assume the forwarding notice expired before the renewal was sent.

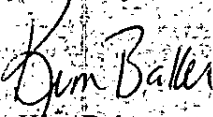
I am asking for reinstatement and also that the reinstatement fee be waived. Since the 2002 report was filed, there has been a buyout of partners, the office was relocated and we have had several turnovers in management.

I was also told to include a check in the amount of \$300 along with the reinstatement application.

If you need any further information I can be reached at (704) 847-2009.

Thank you in advance for your assistance in this matter.

Sincerely,


Kim Baker
Controller