


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

 <p><b>CORPORATION REINSTATEMENT</b></p>		<p>FLORIDA DEPARTMENT OF STATE <b>Jim Smith</b> Secretary of State DIVISION OF CORPORATIONS</p>		<p>03 APR 25 AM 9:12</p> <p>SECRETARY OF STATE TALLAHASSEE, FLORIDA</p>																													
<p><b>DOCUMENT #</b> <u>PO0000096 287</u></p> <p><b>1. Corporation Name</b> <u>Federal PARTNERSHIP HOLDINGS, INC.</u> <u>14200 NW 57th AVE</u> <u>HIALLAH, FL 33014</u></p>		<p><b>2. Principal Office Address</b> <u>SAME</u></p> <p>Suite, Apt. #, etc.</p> <p><b>City &amp; State</b></p> <p>Zip <u>USA</u> Country</p>		<p><b>3. Mailing Office Address</b> <u>SAME</u></p> <p>Suite, Apt. #, etc.</p> <p><b>City &amp; State</b></p> <p>Zip Country</p>																													
<p><b>4. Date Incorporated or Qualified To Do Business in Florida</b> <u>11/15/1997 to 1/1/00</u></p>		<p><b>5. FEI Number</b> <u>36-4528081</u></p> <p>Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/></p>		<p><b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status</p>																													
<p><b>7. Name and Address of Current Registered Agent</b></p>																																	
<p>Name <u>MARK REVITZ</u></p> <p>Street Address (P.O. Box Number is Not Acceptable) <u>14200 NW 57th AVE</u></p> <p>Suite, Apt. #, Etc.</p> <p>City <u>HIALLAH</u> State <u>FL</u> Zip Code <u>33014</u></p>																																	
<p><b>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.</b></p> <p>Signature of Registered Agent <u>[Signature]</u> Date <u>2/20/03</u></p> <p style="text-align: center;">REGISTERED AGENT MUST SIGN</p>																																	
<p><b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b></p> <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><u>D</u></td> <td><u>JANICE REVITZ</u></td> <td><u>10130 W. BROADVIEW DR.</u> <u>Bay Harbor Island FL 33154</u></td> <td></td> </tr> <tr> <td><u>D</u></td> <td><u>MARK REVITZ</u></td> <td><u>10665 NE QUAYBORDET CT.</u> <u>1</u></td> <td><u>MIAMI, FL 33138</u></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	<u>D</u>	<u>JANICE REVITZ</u>	<u>10130 W. BROADVIEW DR.</u> <u>Bay Harbor Island FL 33154</u>		<u>D</u>	<u>MARK REVITZ</u>	<u>10665 NE QUAYBORDET CT.</u> <u>1</u>	<u>MIAMI, FL 33138</u>																
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<p><b>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.</b></p> <p>SIGNATURE: <u>[Signature]</u> Date <u>2/20/03</u> Daytime Phone # <u>305-921-1421</u></p> <p style="text-align: center;">SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</p>																																	

CR2E081 (9/01)

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Federal Partnership Holdings, Inc.  
14200 NW 57<sup>th</sup> Avenue  
Hialeah, FL 33014

February 20, 2003

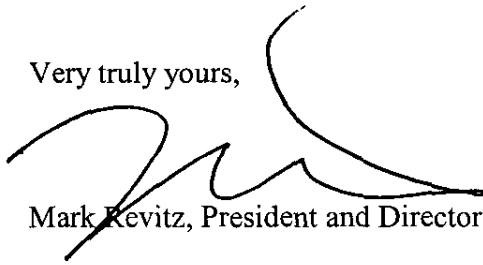
Florida Department Of Revenue  
Joseph Shivers  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Mr. Shivers:

I am writing in connection with the enclosed corporation reinstatement of Federal Partnership Holdings, Inc. Unfortunately, the address indicated for this entity was a property that was condemned by the Department of Transportation and as a result I never received the Uniform Business Reports. It just came to my attention that this entity was indicated inactive and I am therefore applying for the reinstatement and the filing of our current annual report. Since we never received the report we are respectfully requesting a waiver of the reinstatement fee.

We have enclosed the annual report fees as per our conversation. I greatly appreciate your assistance with this matter.

Very truly yours,



Mark Revitz, President and Director