PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	SECRETARY OF STATE DIVISION OF CORPORATIONS 07 OCT -2 PM 1:50
DOCUMENT # Pol OCC	012527	
Earthlink invest	tments, corp.	04/21/02 90885 625 153
2. Principal Office Address - No P.O. Box # 3625 NW 82 aw # 20	3. Mailing Office Address 3625 NW 82aw#	04/21/02 90885 625 150 REINSTATEMENT 62 - 67
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. Date Incorporated or Qualified
City & State Miaw, Th	City & State Miaw FL	To Do Business in Florida 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2
33166 Country ade.	33166 Country ade.	Not Applicable 6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Name and Address o	f Current Registered Agent	
Conston A. Go	(30.	The reinstatement fee is imposed, except in circumstances which the entity did not receive
Street Address (P.O. Box Number is Not Acceptable 10730 NW 665+ Suite, Apt. #, Etc.	Apt 409	the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement
G109	State Zip Code FL 33/28	fee be waived.
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 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 Eac	City / State / Tip
P.D Corgo Gastor) 10730 NW 6651 11 C	109 = Mini 72-133128
		OSK 194 PLIL-GIOGH LAND AND TO THE A
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 filling 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 contained in Chapter 119, F.S. The information indicated on this application is true and accurate, and my signature shall have the earne legal effect as if made under oath.		
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Daytime Phone #		

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Re: Earthlink Investments, corp.

To Whom It May Concern:

As per a recent conversation I had with a representative at the Florida department of state (division of corporations) I found out that the 2002 annual report that was send to me, I never received it because we move from that location I will like to ask that you considered my case and waived the \$600.00 reinstainment fee I like to also ask that the \$150.00 dollars that are in hold for year 2002 to be used for the reinstatement fee, I thank you before hand for your comprehension and take into consideration that this all was new to me and that I did not have any knowledge of all this procedures thank you.

Sincerely;

Gaston Corzo

President.