

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 FEB 12 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000015152

1. Corporation Name
Larry A. Harshman, P.A.

2. Principal Office Address
10661 N. Kendall Drive

3. Mailing Office Address
10661 N. Kendall Drive

Suite, Apt. #, etc.
Suite 118

Suite, Apt. #, etc.
Suite 118

City & State
Miami, FL

City & State
Miami, FL

Zip Country
33176 U.S.A.

Zip Country
33176 U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number
651081289

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required
for a Certificate of Status

500028633765
02/12/04--01008--002 **300.00

7. Name and Address of Current Registered Agent

Name
Larry A. Harshman

Street Address (P.O. Box Number is Not Acceptable)
10661 N. Kendall Drive

Suite, Apt. #, Etc.
Suite 118

City
Miami

State Zip Code
FL 33176

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

[Signature] LARRY A. HARSHMAN
REGISTERED AGENT MUST SIGN

Date 2/6/2004

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, D	Larry A. Harshman	10661 N. Kendall Drive, Suite 118	Miami, FL 33176

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.

SIGNATURE:

[Signature] LARRY A. HARSHMAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/6/2004

Date

305-279-9848

Daytime Phone #

CR2E081 (01/04)

LAW OFFICES OF LARRY A HARSHMAN, P.A.
10661 N Kendall Drive, Suite 118
Miami, FL 33176



Telephone: (305) 279-9848
Facsimile: (305) 279-3238
E-mail: larryaharshman@yahoo.com

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February 6, 2004

Florida Department of State
Division of Corporations

Re: Uniform Business Report

Dear Sir/Madam:

I am the President and Director of Larry a. Harshman, P.A. This week, while performing an on-line search, I checked the information regarding my company. I was quite surprised to discover that my corporation was in "inactive" status due to an administrative dissolution.

I realized that I had not received the 2003 Uniform Business Report, nor did I receive any notice of dissolution. I called the Division of Corporation's Internet Filing Help Desk and discovered that the mailing address for the company had not been updated.

I was instructed to download a Corporation Reinstatement form and to send it in with a check in the amount of \$300.00. The fee would be \$150 for 2003 and \$150 for 2004. Attached to this letter is the Corporation Reinstatement form and my check.

Please let me know if there are any problems with reinstating my company. Your assistance with this matter is greatly appreciated.

Sincerely,


Larry A. Harshman