

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

04 JUL 23 PM 12:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** P01000017663

**1. Corporation Name**

INTERNATIONAL URBAN DEVELOPERS INC.

**2. Principal Office Address**

P.O. BOX 14493

**3. Mailing Office Address**

P.O. BOX 14493

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33690

Country

U.S.A.

Zip

33690

Country

U.S.A.

**4. Date Incorporated or Qualified  
To Do Business in Florida**

02/16/2001

**5. FEI Number**

☒ Applied For  
☐ Not Applicable

**6. CERTIFICATE OF STATUS DESIRED** ☐

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

PETER CHAN

Street Address (P.O. Box Number is Not Acceptable)

3217 S.MACDILL AVE

Suite, Apt. #, Etc.

City

TAMPA

State

FL

Zip Code

33690

100039734001  
07/30/04--01057--017--\*\*300.00

**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

*Peter Chan*  
REGISTERED AGENT MUST SIGN

Date 07/07/04

**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
D	RICKY LEE	3217 A S.MACDILL AVE	TAMPA FL 33690

**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:**

*Ricky Lee*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICKY LEE DIRECTOR

Date 07/07/04

Daytime Phone #

CR2E081 (9/01)

JULY 07 2004.

INTERNATIONAL URBAN DEVELOPERS INC  
P.O. BOX 14493  
TAMPA FL 33690

DIVISION OF CORPORATIONS  
409 E GAINES ST  
TALLAHASSEE FL 32399

ATT: SEAN TONER

RE: REINSTATEMENT OF CORP.

DEAR SIR:

THIS LETTER IS A FOLLOW-UP TO OUR CONVERSATION OF TODAY'S DATE WHEREIN WE EXPLAINED THAT THROUGH NO FAULT OF OUR OWN WE FOUND OURSELVES UNINFORMED OF FILING OUR YEARLY BUSINESS REPORT DUE TO THE FACT THAT IT WENT TO THE WRONG ADDRESS. THE CAUTION TO FILE HAD INADVERTENTLY GONE TO OUR PREVIOUS ADDRESS. NEITHER THE STATE NOR US COULD BE FAULTED AND THAT IS WHY WE ARE ASKING FOR YOUR MERCY IN REINSTATING US.  
THANKING YOU FOR YOUR ANTICIPATED COOPERATION.

SINCERELY,



INTERNATIONAL URBAN DEVELOPERS INC.