	PLEASE READ	ALL INSTR	RUCTIONS BEFORE (COMPLETING T		
COF REIN	(5) 新疆 (5) 生 (4) (5) (5) (6) (6) (6) (6) (6) (6) (6) (6) (6) (6	FLORIDA D	EPARTMENT OF STATE Jim Smith cs ary of State N F CORPORATIONS	0	SECRETARY OF COP	PORTTONS
DOC	JMENT # P01000	032477				
1. Corpora	ation Name TROPICAL HEAT	PRODUCTI	ONS, INC.			
		T -	•	4000	0876363	34
	atura Street	3. Mailing Office Address 224 Datura		400008763634 11/01/0201097012 **158.75		
Suite, Apt. #	#, etc. 1112	1	Suite, Apt. #, etc. Suite 1112		Overlified	
City & State		City & State		4. Date Incorporated or Qualified To Do Business in Florida 03/26/01		
	Palm Beach, FL	West Palm Beach, FL		5. FEI Number Applied For		
^{Zip} 33401	Country Palm Beach	Zip 33401	Country Palm Beach	65-11497 6. CERTIFICATE OF STATE	IS DESIDED \$8.75 AC	Not Applicable Idditional Fee required Certificate of Status
		7. Nam	e and Address of Current Register	L ed Agent	, in the second	retificate of Status
Name Bruce I. Kravitz Street Address (P.O. Box Number is Not Acceptable)						
						
	1870 Forest Suite, Apt. #, Etc.					
Suite 211						
City West Palm Beach				State FL	Zip Code 33406	
8. I, being	appointed the registered agent of the abo	ve named corporati	on, am familiar with and accept the ob	pligations of section 607.05	05 or 617.0503, F.S.	(10/6)
Signature of Registered					10/23/02	CR2E081 (9/01)
r togistered /		GISTERED AGEN	Date 10/23/02			
9. Names	and Street Addresses of Each Officer and	/or Director (Florida	nonprofit corporations must list at lea	ast 3 directors)		
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip	
5	BRUCE KRAVITZ		1870 forest Hill #211 WB FL 33406			
						l l
	<u> </u>					
this rein owed by	that I am an officer or director or the receistatement application, the reason for dissorting the corporation have been paid and the rapplication is true and accurate, and my signal.	plution has been elir ames of individuals	ninated, the corporate name satisfies to tisted on this form do not qualify for a	the requirements of section n exemption under section oath.	607.0401 or 617.0401, F. 119.07(3)(i), F.S. The info	.S., that all fees rmation indicated
SIGNAT	URE: SIGNATURE AND TYPED OR PRI		ce I. Kravitz,	Secretary	561) 641-02 10/23/0	02
		HAME OF SIGN	TO SPRIGER ON DIRECTOR	Date	Daytime Ph	one #

21 1/1/02

BRUCE I. KRAVITZ, P.A.

Attorney at Law

1870 Forest Hill Boulevard Suite 211 West Palm Beach, Florida 33406 Telephone (561) 641-0262 Facsimile (561) 641-0269 **E-Mail: BIKPA@aol.com**

October 23, 2002

VIA FEDERAL EXPRESS

Department of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

RE: Tropical Heat Productions, Inc.

Document #: P01000032477

Dear Sir or Madam:

Enclosed please find an application for Corporation Reinstatement in the above-referenced corporation. Also enclosed please find check number 6788 in the amount of \$158.75, payable to the Department of State.

Please be advised that I am requesting a waiver of Reinstatement fee because Tropical Heat Production, Inc. relocated their offices and the Registered Agent also relocated their offices so we never received the Annual Report to forward to the Department of State.

If you have any questions please do not hesitate to contact me in the above-listed number.

Sincerely,

Bruce I. Kravitz

BIK/In Enclosures

verkchSTINCORPADOCS\CLIENTS\Tropical\Dept of State - Reinstatment