


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>P01000049090</u>			
1. Corporation Name SPACE COWBOYWS, INC. <u>WD4000012414</u>			
2. Principal Office Address 5908 N ARMENIA AVE Suite, Apt. #, etc. 100 City & State TAMPA, FL Zip <u>33603</u> Country <u>USA</u>		3. Mailing Office Address 5908 N ARMENIA AVE Suite, Apt. #, etc. 100 City & State TAMPA, FL Zip <u>33603</u> Country <u>USA</u>	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUN -7 PM 3:17

REINSTATEMENT 02-04

03/30/04 01072 018 20

4. Date Incorporated or Qualified To Do Business in Florida 05/16/2001	
5. FEI Number 59-3735328	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name ROIG, RICARDO A., ESQ.	
Street Address (P.O. Box Number is Not Acceptable) 4023 N ARMENIA AVE Suite, Apt. #, Etc. 400 City TAMPA	
State FL	Zip Code 33607

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06/17/04--01042--001 **150.00

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 <u>Ricardo A. Roig</u>	Date 3/15/04
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 Each Officer and/or Director	City / State / Zip
D	Michael Nardelli	5908 N Armenia Ave, suite 100	Tampa, FL 33603

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:	<u>Michael D Nardelli</u>	3/15/04	813-876-3664
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #

CR2081 (01/04)

Space Cowboys, Inc

5908 N Armenia Ave, Tampa, FL 33603 - (813) 876-3664

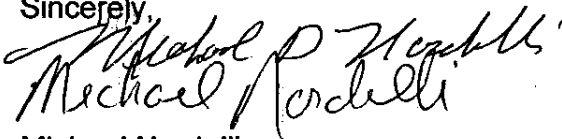
Florida Department of State
Division of Corporations
409 East Gaines St.
Tallahassee, FL 32399

Tampa, March 15, 2004

Hereby, Space Cowboys, Inc., (FEI 59-3735328) files for a waiver of the Reinstatement fee. The corporation has never received the Annual Report Form from the year it was dissolved, presumably because the registered agent at that time is not part of Space Cowboys anymore and that the company has moved twice.

Find along with this letter the Corporation Reinstatement form and the check for the Annual Report Fee and Corporate Supplemental fee.

Sincerely,

A handwritten signature in black ink that reads "Michael P. Nardelli". The signature is written in a cursive, flowing style.

Michael Nardelli
Director