

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.


FILED

04 SEP 27 AM 11:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-09

500041366155
09/27/04--01043--017 **300.00

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 401A00043756 <i>PO1000074108</i>			
1. Corporation Name LCV Investments Inc. 928 Falling Water rd 928 Falling Water Rd			
2. Principal Office Address 928 Falling Water rd Suite, Apt. #, etc.		3. Mailing Office Address 928 Falling Water Rd Suite, Apt. #, etc.	
City & State Weston/Fl		City & State Weston/Fl	
Zip 33326	Country US	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida 7/27/01	
5. FEI Number 65-1143523	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 Luis Vecchi		
Street Address (P.O. Box Number is Not Acceptable) 928 falling water rd		
Suite, Apt. #, Etc.		
City weston	State FL	Zip Code 33326

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**

Date

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
Pres	Luis Vecchi	928 falling water rd	Weston fl 33326
Sec	Luis Vecchi	Same	Same

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (01/04)

LCV INVESTMENTS
928 FALLING WATER RD
WESTON, FL 33326

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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September 23, 2004

Florida Department of State

Dear Sir or Madam:

I have sold the assets of LCV Investments on 2003 but kept the corporation going, due to address changes and other inconvenient; it looks like I haven't received the form to keep the corporation in your files.

Please find enclosed \$300 to pay for 2003 and 2004 filing fees, and accept my apologies for any inconvenience that this may cause, since for me is very important keep this corporation.

Sincerely,



Luis Vecchi
President