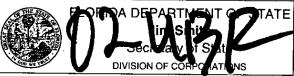
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



DOCUMENT #

P01000076970

1. Corporation Name

FIFTH AVENUE JEWELS, INC.

Principal Place of Business

1041 SINGER DRIVE RIVIERA BEACH FL 33404 Mailing Address

1041 SINGER DRIVE RIVIERA BEACH FL 33404 FILED

02 NOV -7 AM 9: 24

SECRETARY OF STATE TALLAHASSEE, FLORIDA



If above a	addresses are	incorrect in any way, line the	rough incorrect	information and	d enter correction below	v.	M		
				Mailing Office Address, If Applicable		4. Date Incor	4. Date Incorporated or Qualified To Do Business in Florida 08/06/2001 5. FEI Number - Applied 5		
Suite, Apt. #, etc. Suite, Apt.									
City & State	9		City & State			- 65/12/903 - Applied.For_			
Zip Country			Zip Countr		Country	6.	6.		
					Country	CERTIFICAT	CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status		
7. Names a	and Street Ad	dresses of Each Officer and	or Director (Flo	orida nonprofit	corporations must list a	t least 3 directors)			
Title(s)	(s) Name of Officers and/or Directors				Street Address of E Officer and/or Dire		City / State / Zip		
P	P RAMON, OSCAR			1041 SING	GER DRIVE		RIVIERA BEACH FL 33404		
								•	
						90 11/07/	0008868 0 0201057005	529 **150.00	
8. Name and Address of Current Registered Agent						Name and Address of New Registered Agent			
FINANC	NAI EOUNT	DATIONS INC		man-itta	- Name				
FINANCIAL FOUNDATIONS, INC. 3150 SANDY RIDGE DRIVE					Street Address (P.O. B		. Box Number is Not Acceptable)		
CLEARWATER FL 33761					Suite, Apt. #, Etc.				
					City	City State Zip Code			
10. I, being a	appointed the	registered agent of the abo	ve named corpo	ration, am fam	iliar with and accept the	obligations of Secti	ion 607.0505, F.S. or 617.0)505, F.S.	
Signature of Registered A	Agent	Institute of	MACCAL)	Jund ENT MUST SI	Charles D	oul	Date	22/82_	
11 Loodifical	hot I don out of	financia di santa di							

1. 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 filling 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:

SCAL A MISIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/28/200\ 56/-863-4992

red

Fifth Avenue Jewels, Inc. 1041 Singer Drive Riviera Beach, Florida, 33404 (561) 863-4492

October 28, 2002

Florida Department of State Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee Fl 32314-6327

Ladies/Gentlemen

Re: P01000076970 - Penalty Fee

This is to request that the Penalty Fee for failing to file a Unified Business Report be waived. This is a recently formed corporation and it is my understanding that this report was mailed to me for filing earlier this year. I do not recall receiving such form and was unaware of the need to file by May 1 of this year, prior to my corporate accounting cycle.

I request that the penalty fee be waived. As a newly formed business I am having very difficult time getting started and such penalty fee would be a serious burden at this time.

Your consideration would be appreciated.

Thank you very much,

Oscar Ramon

President