

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.


1 of 2

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

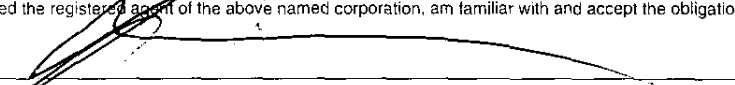
2002-2003 UBR

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <i>PO/000086/76</i>			
1. Corporation Name Biztex, Inc.			
2. Principal Office Address 2890 Griffin Road Suite, Apt. #, etc. Suite 5 City & State Dania Beach, Florida Zip 33312		3. Mailing Office Address 2890 Griffin Road Suite, Apt. #, etc. Suite 5 City & State Dania Beach Zip 33312	
Country Broward		Country Broward	

4. Date Incorporated or Qualified To Do Business in Florida 08/30/2001	
5. FEI Number 01-0717943	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 Harold Weissman		
Street Address (P.O. Box Number is Not Acceptable) 1776 North Pine Island Road		000021793980 07/25/03-01060-015 **900.00
Suite, Apt. #, Etc. Suite 118		
City Plantation	State FL	Zip Code 33322

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.

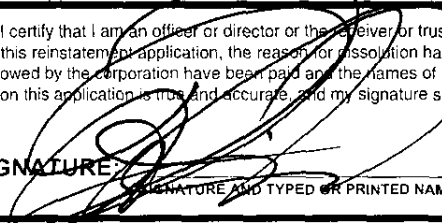
Signature of Registered Agent:  Date: July 21 2003

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
P	Michael P. Omara	8105 SW 21st Court	Davie, Florida 33324
VP	Daniel B. Roller	8105 SW 21st Court	Davie Florida 33324
T	Hildegard Omara	9719 NW 16th Court	Pembroke Pines Florida 33024

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:  Michael Omara Date: 07/21/03 Daytime Phone #: 954-964-1099

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (10/02)

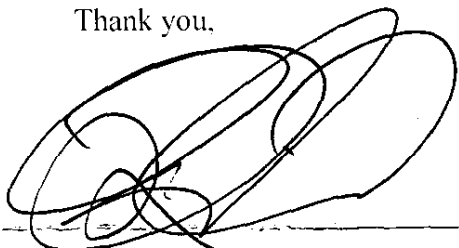
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To Whom It May Concern:

July 21, 2003

Biztex, Inc. is asking for a waiver of penalties for failure to renew corporation do to the fact that we moved and never received our renewal forms from the state of Florida. Enclosed please find a check for 2002 and 2003 renewal payment and the corporation reinstatement form filled out.

Thank you,



Michael Omara
President
Biztex, Inc.
Phone 954-964-1099
Fax 954-964-1934
