PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.		
CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	2005 OCT 19 PH 2: 59 SECRETARY OF STATE TALLAHASSEE. FLORIDA
DOCUMENT # PO 1000092293 1. Corporation Name RUSTY'S PALLETS Service, Inc. 53/5 N. 37 Th ST.		
Jampa, FC 3 2. Principal Office Address The ST: 15 N: 37 ST: 10	36/0 3. Meiling Office Address 1402 Aven wood CT. LUTZ FL 33559	700060782847 10/19/0501068017 **158.75
Tampa, 72.336/0	Suite, Apt. #, etc.	CR2E081 (8/05) -4. Date Incorporated or Qualified September 20,01 To Do Business in Florida
City & State Tampa FL Zip Country	City & State LUTZ, F Zip Country	5. FEI Number Applied For Not Applicable
336/0 Hillsborough	33559 PASCO	CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
Name Benedict B. Flahn Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City LuTZ Suite, Apt. # State Zip Code FL 33559 8. 1, being appointed the registered agent of the above named copporation, 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 Street Address of Each City / State / Zip		
Officers and/or Directors		01
V. PRES. FATU K. H	OWARD 1402 Avon wi	ood CT. LUTZ, FL 33559
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 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 fisted 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 #		

RUSTY'S PALLETS SERVICE,INC.

5315 NORTH 37TH STREET TAMPA, FL 33610

TO:FLORIDA DEPT.OF STATE
RE:CORPORATION REINSTATEMENT

Dear sir,

This letter will serve as a official reason for not filing in time.we moved and did not received an official renewal notice in the mail. We also send you a change of address in the mail. We therefore ask that the reinstatement be waive.

Truly,

Benedict B.Flahn

President