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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETINGLEDS FORM.

CORPORATION REINSTATEMENT PO1000095569 1. Compression Name MAX TREES, INC. Sum, Apt. 1, 60. Sum, Apt. 2, 60. Cy & State MIAMI, FL Country Sulfs Address of Current Registered Agent To Do Business in Prioritis 97/28/2001 Sulfs, Apt. 1, 60. Sulfs, Apt. 2, 60. To Do Business in Prioritis 97/28/2001 Sulfs, Apt. 2, 60. To Do Business in Prioritis 97/28/2001 Sulfs, Apt. 2, 60. To Do Business in Prioritis 97/28/2001 Sulfs, Apt. 2, 60. To Do Business in Prioritis 97/28/2001 Sulfs, Apt. 2, 60. To Do Business in Prioritis 97/28/2001 Sulfs, Apt. 2, 60. To Do Business in Prioritis 97/28/2001 Sulfs, Apt. 2, 60. To Do Business in Prioritis 97/28/2001 Sulfs, Apt. 2, 60. To Do Business in Prioritis 97/28/2001 Sulfs, Apt. 2, 60. Sulfs, Apt. 2, 60. Sulfs, Apt. 2, 60. Sulfs, Apt. 3, 60. Sulfs, Apt. 3, 60. Sulfs, Apt. 3, 60. Sulfs, Apt. 4, 60.									
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City MIAMI State Zip Code FL 33155 8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0503 or 617.0503, F.S. Signature of Date Y-22-644 9. Names and Stephaddresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Titles Officers and/or Directors Street Address of Each Officer and/or Director City / State / Zip P JUAN JAVIER FLEITES 8465 SW 44 STREET MIAMI, FL 33155 10. Learlify 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 leas owed by the corporation have been paid and the names of infinity data leads to the same legal effect as if made under certific that the and accurate, and my signature that have the same legal effect as if made under certific that the and accurate, and my signature that have the same legal effect as if made under certific that the and accurate, and my signature that have the same legal effect as if made under certific that the and accurate, and my signature that have the same legal effect as if made under certific that the and accurate, and my signature that have the same legal effect as if made under certific that the certific that the certific that the certific that when filing this reinstatement application have been paid and the names of filing that the corporation made accurate, and my signature that have the same legal effect as if made under certific that the certific that		Street Address (P.O. Box Number is Not Acceptable) 8465 SW 44 STREET							
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NEIL J. MORNICK, C.P.A.

CERTIFIED PUBLIC ACCOUNTANT Kendall Summit Executive Centre, #204 11440 N Kendall Drive Miami, FL 33176 Tel. (305) 598-2224 Fax. (305) 598-2226

April 22, 2004

Reinstatement Division Florida Dept of State Division of Corporations P O Box 6327 Tallahassee, FL 32314

Re: Max Trees, Inc.

Document No.: P01000095569

Gentlemen:

Enclosed please find a completed and signed Application for Reinstatement with check No. 1510 for \$150 being renewal fees for 2003.

Please be explained that this corporation had changed its address since December 2002. They were not aware of the non-renewal until we drew their attention that the corporation had not filed the 2003 UBR when we were going through their books for 2003. Obviously, they had not received the 2003 UBR notice since the mailing/actual address had changed.

I am writing to be seech this one-time abatement of late filing penalty. Please confirm to us in writing your acceptance. Enclosed also is check No. 1511 for \$150 to renew 2004 Annual Report. I was not able to down load the renewal form for 2004 as the corporation was in a delinquent state. Thank you so much for your attention.

Sincerely,

Neil J. Mornick, CPA

NJM/kk Enc.

cc: Client