PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FILED WAT **APPLICATION FOR** REINSTATEMENT **DIVISION OF CORPORATIONS** P01000097077 DOCUMENT # 02 NOV -7 AM 9: 04 1. Corporation Name SECRETARY OF STATE TALLAHASSEE, FLORIDA SOUTHFLORIDA PALM & PLANT LINERS CORP. Principal Place of Business Mailing Address 20951 SW 242 ST. 20951 SW 242 ST. MIAMI FL 33031 MIAMI FL 33031 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 4. Date Incorporated or Qualified To Do Business in Florida 10/04/2001 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State 6 \$8.75 Additional Fee required Country Zip Country CERTIFICATE OF STATUS DESIRED. for a Certificate of Status 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each City / State / Zip and/or Directors Officer and/or Director VICTOR, SANTOS M JR. 20951 SW 242 ST. MIAMI FL 33031 VICTOR, SANTOS M III 20951 SW 242 ST. MIAMI FL 33031 ERIKA, RODRIGUEZ L 20951 SW 242 ST MIAMI FL 33031 300008868683 11/07/02--01057--008 **150.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent SANTOS, VICTOR M JR." Street Address (P.O. Box Number is Not Acceptable) 3R2E040 20951 SW 242 ST **MIAMI FL 33031** Suite, Apt. #, Etc. State Zip Code 10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN 11. 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:

Zip

Title(s)

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RE AND TYPED OR PRINTED NAME OF SIGNING

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SOUTHFLORIDA PALM & PLANT LINERS CORPORATION

20951 SW 242 Street

Homestead, FL. 33031

Phone Number: 305-248-0175

November 5, 2002

Florida Department of State Division of Corporations Annual Report/Reinstatement section PO Box 6327 Tallahassee, Florida 32314-6327

Dear Sirs,

After speaking to a person in your department they indicated I should write this letter directly to your office. We seem to have a problem receiving mail from your department. As of right now I just received these papers. I will send the \$150.00 with this letter. That is not the only problem I have I never received these paper for C.F. CLOCK'S CANDY TOWN CORPORATION also.

(1) THREE WAY CONSTRUCTION CORPORATION: Tracking Number 500006459165

I never received the actual corporation papers. I could not find the date it was filed. This one is OK because we never got to start the business.

(2) SOUTH FLORIDA PLANT GROWER INC 10/03/02 Tracking Number 600008187936

This one am waiting for so I can get all my nursery permits.

If you could be so kind in helping me with these problems this will greatly appreciated.

Thank-You

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Registered Agent