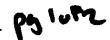
## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



....



FLORÎDA DEPARTMENT OF STATE Jim-S*i*nith,

Secretary of State DIVISION OF CORPORATIONS

P01000097808 DOCUMENT #

1. Corporation Name

## NOVUSLINE INTERNATIONAL CORPORATION

Principal Place of Business

Mailing Address

9179 FOUNTAINEBLEAU BLVD.

2 May Principal Office Address If Appliedbl

SUITE 3 MIAMI FL 33172 9179 FOUNTAINEBLEAU BLVD

SUITE 3

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

MIAMI FL 33172



FILED

02 NOV 20 PM 3: 28

SECRETARY OF STATE TALLAHASSEE, FLORIDA

/00/01/09/08/097 11/20/01/40/04/70% \*\*150.00

807 - Suite, Apt.	5.W2JAVE \$201 #. etc. AMI, T-1.	Suite, Apt. #. etc.			4. Date Incorporated or Qualified To Do Business in Florida 10/08/2001			
mi	AMI, T-1.	, , , , , , , , , , , , , , , , , , , ,			5. FEI Number		Applied For	_
City & Stat	e	City & State			65-1/4 7538 Not Applicab			le
Zip 331		Zip		Country	CERTIFICATE OF STATUS DESIRED [_]		\$8.75 Additional Fee requi for a Certificate of Status	
7. Names	and Street Addresses of Each Officer and/o	or Director (Flo	rida nonprof	it corporations must list at le	east 3 directors)			
Title(s)	Name of Officers and/or Directors			Street Address of Eacl Officer and/or Directo		City	/ State / Zip	
D	HERLLE, MYRUAN MYRIAN		9179 FOUNTAINEBLEAU BLVD. SUITE			MIAMI FL 33172		
	,				70 11/20/	<b>0009088</b> 020100103	:097   **150.00	
					$V_{10/29/0}^{10/29/0}$	00000000000000000000000000000000000000	<b>381</b> **150.00	
				H in				
				P				
8. Name and Address of Current Registered Agen			nt		9. Name and Address of New Registered Agent			ᅱ
HERLLE, MYRIAN 9179 FOUNTAINEBLEAU BLVD.				Name Street Address (P.O. Box Number is Not Acceptable)				
IAITATAI	11 00772			City	<del></del>		tate Zip Code	7
0. I, being	appointed the registered agent of the abov	e named corpo	ration, am fa	miliar with and accept the c	obligations of Section	on 607.0505, F.S. or 617.	0505, F.S.	$\exists$

Signature of Registered Agen

SIGNATURE REQUIRED

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.



10-21-02 305-551-7419



9179 Fountainebleau Blvd. Unit # 3 - Miami, Fl\_33172 (305) 551-7419

October 21st, 2002

Florida Department of State Mr. Jim Smith Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Dear Florida Department of State,

On October 21st, I received an Administrative Dissolution or Revocation notice from your department. After read it, knowing that I did not received the notice with the Annual Report mentioned on it, I called to my Accountant that informed me more about this document that I supposed to receive every year during the first months. I was looking into the Corporation file, searching for it, with no results. I called to this department and I spoke to Mr. Joseph who informed me that I may write a letter explaining that I did not received it.

That is what I am trying to explain formally, that I did not received that document, and I was in country during the first months of the year, then I don't understand what really happen.

As I will be traveling abroad and with the fully intention to have all my legal documents for the corporation centralized into just one address, I am sending my Accountant office address, who will be in charge to make and pay everything on time for the future years to come.

## Perez-Arche & Associates

Accounting & Tax Preparation Inc.
Mario Perez-Arche
President
807 SW 25<sup>th</sup> Ave., suite 201, Miami, FI 33135
Phone /Fax (305) 649-7040

For questions or clarifications, please do not hesitate to contact me by phone or email, which is the quickest way of response at <a href="mailto:mvh@novusline.com">mvh@novusline.com</a>

Respectfully,

NovusLine International Corp. President

Myrian Vidal Herlle

Enclosure (1)