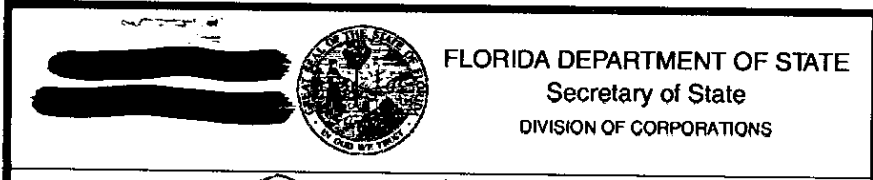


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

10f2



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
03 MAR 18 AM 9:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # PO1000110906  
1. Corporation Name  
TRANSLATION INTERPRETING & LANGUAGE SERVICES, INC.

2. Principal Office Address <u>6405 N.W. 36<sup>th</sup> Street</u>		3. Mailing Office Address <u>6405 N.W. 36<sup>th</sup> Street</u>	
Suite, Apt. #, etc. <u>Suite 115</u>		Suite, Apt. #, etc. <u>Suite 115</u>	
City & State <u>MIAMI FL</u>		City & State <u>MIAMI FL</u>	
Zip <u>33166</u>	Country <u>FL U.S.A</u>	Zip <u>33166</u>	Country <u>U.S.A.</u>

200013907622  
03/11/03--01011--016 \*\*300.00  
4. Date Incorporated or Qualified To Do Business in Florida 11/20/2001  
5. FEI Number 26-0004358  
Applied For Not Applicable  
6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status

2002-2003  
LIBR

02-03

7. Name and Address of Current Registered Agent

Name DIANA RISTOW  
Street Address (P.O. Box Number is Not Acceptable) 6405 N.W. 36<sup>th</sup> Street  
Suite, Apt. #, Etc. Suite 115  
City MIAMI State FL Zip Code 33166

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 [Signature] Date Mar 7/2003  
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
<u>DPS</u>	<u>TABERNEIRO, ESTHER</u>	<u>6405 N.W. 36<sup>th</sup> Street, suite 115</u>	<u>MIAMI FL 33166</u>

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: [Signature] Date Mar 7/2003 Daytime Phone # 305-5261173  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CP2E081 (10/02)

B3

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: Corporation Reinstatement

Dear Sirs:

It has just come to our attention that our corporation, Translation, Interpreting, & Language Services Inc., was dissolved as an entity according to the Department of State here in Florida. When our corporation was originally formed we paid our fee of \$775.00 to the State of Florida. We were not informed, at that time, that this filing fee was required annually. Therefore, believing it to be only a one-time fee we have not paid the second year due. The trouble is that the Department of State does not send a notice that there is a payment due, or a notice of delinquency stating that a fee is required or dissolution will result. A written notification of this type would have allowed us to correct the problem immediately with no further mishap.

However, The Dept. of State now asks for a reinstatement fee of \$750.00 or more. We believe this is a completely unfair penalty. The original filing procedure for incorporation in the State of Florida is ambiguous concerning the annual fee and the Dept. of State neglected to send out any further notices regarding payments due. In any other private sector business, indeed, even when the government wishes to collect taxes from business owners, statements are sent out showing the amount owed or past due. Subsequently, we are requesting reinstatement of our status as a corporation in the State of Florida or the lesser fee of \$150.00 per year of non-filing, as per our phone conversation with a gentleman from your Dept. We have enclosed a check for the amount of \$300.00 to coincide with the fee for years 2002 and 2003. If there are any further requirements, or if there are any discrepancies in our request for reinstatement, please contact us immediately at the following address or phone number.

Attn: Ester Tabernero de Cruicchi  
Translation, Interpreting, & Language Services Inc.  
6405 N.W. 36<sup>th</sup> St.  
Suite 115  
Miami, FL 33166  
Phone: (305)-526-1173

Regards,

Sra. Ester Tabernero de Cruicchi

