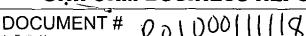
FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)



Lewis Technology Supply Inc







03 MAR 24 AM 8: 56

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DO.N	OT WRITE	IN THIS SI	PACE	4		
2. Principal Place of Business		3. Mailing Address				
15826 Su) 51 5+		15826 SW	5) 5+			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<u> </u>	2		O3 ·· UBR
City & State		City & State			El Number	Applied For
liramar	F1	Miramar		(2	5-1156769	Not Applicable
zip 330 27	Country USA	Zip 33027	Country			\$8.75 Additional Fee Required
	·	n de gest vil de Liggert i de e de de la grafia para la desembla descripto de la grafia d	が () () () () () () () () () (7. Na	me and Address of Current Re	gistered Agent
AND THE PROPERTY OF THE PERSON	O NOT W	A STATE OF THE PARTY OF THE PAR	Name Street A	ddress (P.O. B	ox Number is Not Acceptable)	
	N THIS SP	ACE	158 Cily	26 50	ul 51 5t	FL Zip Code
8 The above named entite the obligations of register.		or the purpose of changing its	registered office of	r registered age	ent, or both, in the State of Florida	<u> </u>
SIGNATURE Signature, typed	or printed name of registered agent	and title if applicable. (NOTE	Registered Agent signat	ure required when re	instating) 3	-21-03
After May	ay 1 Fee is \$150.00 1, Fee is \$550.00 I UBR is \$61.25 I Florida Department of	State			Election Campaign Financi Trust Fund Contribution.	ing \$5.00 May Be Added to Fees
10.	OFFICERS AND	DIRECTORS			. <mark>Azartezak eta barrarren errena eta errena errena.</mark> Eta errena errena eta e	
	ale Leon		NAME		30001455 03/24/03-01086	18308 115 ***********************************
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-21-03 (186) 547-4440



LEWIS TECHNOLOGY SUPPLY, INC 15826 SW 51 STREET MIRIMAR, FL 33027

February 22, 2003

To: DEPARTMENT OF STATE

CORPORATE FILING SECTION 409 EAST GAINES STREET TALLAHASSEE, FL 32314

RE: Corporation Reinstatement and Fees

FL Document #P010001111118

-EIN# 65-1-156769-----

Attn: Katherine Harris;

My accountant was gathering all of my documents and he noticed that my annual report had not been filed. I, Pascale Leon, moved and never received my annual reports. I am still doing business in Florida. Please accept the filing fees for the Annual Report for years 2002 and 2003 of \$150.00 each, a totol of \$300.00 and reinstate my corporation.

Thank you.

Sincerely,

Pascale Leon

President of Lewis Technology Supply, Inc