


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>CORPORATION REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS		<b>FILED</b> 04 APR -1 AM 11:00 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
<b>DOCUMENT # P01000111314</b>					
<b>1. Corporation Name</b> Isis & Angie Corp.					
<b>2. Principal Office Address</b> 102770 Overseas Highway Suite, Apt. #, etc. City & State Key Largo, FL Zip 33037			<b>3. Mailing Office Address</b> - SAME - Suite, Apt. #, etc. City & State Zip Country		
			<b>4. Date Incorporated or Qualified To Do Business in Florida</b> 11/21/2001		
			<b>5. FEI Number</b> 80-0020498		<b>Applied For</b> Not Applicable
			<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/>		<b>\$8.75 Additional Fee required for a Certificate of Status</b>
<b>7. Name and Address of Current Registered Agent</b>					
Name Yoenys Melendez					
Street Address (P.O. Box Number is Not Acceptable) 102770 Overseas Highway					
Suite, Apt. #, Etc.					
City Key Largo				State FL	Zip Code 33037
<b>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.</b>					
Signature of Registered Agent <i>X Yoenys Melendez</i> Date 03/30/2004 REGISTERED AGENT MUST SIGN					
<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b>					
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip		
PSTD	Yoenys Melendez	102770 Overseas Highway	Key Largo, FL 33037		
<b>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.</b>					
SIGNATURE: <i>X Yoenys Melendez</i>			03/30/2004		786-514-9415
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		Daytime Phone #

CR2E081 (01/04)

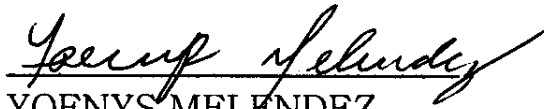
TO: DIVISION OF CORPORATION  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE REINSTATEMENT REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

PLEASE BE ADVICE THAT FOR ANY REASON WE DIN NOT RECEIVE THE ANNUAL REPORT FORM FOR 2002, 2003, 2004. AND PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU FOR YOUR TIME AND CONSIDERATION IN THIS MATTER IN THIS MATTER AND IF YOU SHOULD HAVE ANY FURTHER QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT US.

CORDIALLY,



YOENYS MELENDEZ  
PRESIDENT