PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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REIN	RPORATIO STATEME	NT (S	SION OF CO	MENT OF Soft of State Open of	STATE			FILE O4 JUN 17	D AM 9: 2	2 TE.
1. Corpora Vehicle 4696 12	tion Name			2 09	5		:	·		OL JUN 17 SECRETAN TALLAHASS	Y UT SEE, FLÖ	Aαiģ
2. Principal Office Address				3. Mailing Office Address								
4696 123rd Trail N.				4696 123rd Trail N.				REINS	STA	ITEMEN	III 712	- 70
Suite, Apt. #, etc.				Suite, Apt. #, etc.				4. Date Incorporated or Qualified				
City & State				City & State				To Do Business in Florida 12/28/2001				
Royal Palm Beach, Florida				Royal Palm Beach, Florida				5. FEI Number				
z _{ip} 33411	Country USA			Zip 33411		Country USA		6. CERTIFICATE OF STATUS DESIRED S8.75 Additional for a Certificate			Additional F	ee required
				7. N	ame and Ac	Idress of Curre	nt Register	ed Agent				
	Name Gregory H. Beck											
	Street Address (P.O. Box Number is Not Acceptable) 4696 123rd Trail N. Sulte, Apt. #, Etc. City Royal Palm Beach State Zip Code 33411											
	<u> </u>								FL	33411		
S. I, being appointed the registered agent of the above hamed corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN											CR2E081 (01/04)	
9. Names	and Street Add	resses of Each (Officer and/or D	Director (Flor	rida nonprofi	it corporations m	ust list at le	ast 3 directors)				
Titles	Name of Officers and/or Directors				Street Address of Each Officer and/or Director				City / State / Zlp			
P,T,V,S	GREGORY H. BECK				4696 123rd Trail N.				Royal Palm Beach, FL 33411			
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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 filling 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 AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #												

ps Jaga

Gregory H. Beck Vehicle Maintenance Technologies, Inc. 4696 123rd Trail N Royal Palm Beach, Florida 33411 561-436-6536

June 15, 2004

Department of State Division of Corporations 409 East Gaines Street Tallahassee, Florida 32389

Reference: Corporation Reinstatement

Dear Sir/Madam;

It was brought to my attention yesterday that my corporation was inactive. I found out since then the corporation was inactive due to the non-filing of the annual report. I request the reinstatement fee to be waived since I never received the report at the above address. Please find enclosed the three years back filing fee of \$450.00.

If you have any question please do not hesitate to contact me.

Sincerely,

Gregory H_Beck

President

FA info wasn't filly keyed in when PA name/add changed on this changed on this doc- please tox detabase!