## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS HORM.

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CORPORATION REINSTATEMEN	(中央大型) · 工具是 · [2]	Se	DEPARTMENT OF STAT ecretary of State ION OF CORPORATIONS	ΓE	03 OCT 17 AMII: SECRETARY OF STATALLAHASSEE, FLOR	. •	
DOCUMENT # P02000015620  1. Corporation Name						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
THAO'S SERVICES, INC				1071 1071	<b>500023910555</b> 10/17/0301071022 **150.00		
2. Principal Office Address  P201 Somersworth  Suite, Apt. #, etc.		3. Mailing Office Address 7201 SomERSWORTH DR Suite, Apt. #, etc.			VSTATEMENT porated or Qualified	03	
City & State		City & State		To Do Bus	iness in Florida 02 07	2002	
ORLANDO, FL.		ORLANDO FL		5. FE! Number	522737	Applied For Not Applicable	
32835 COL	intry 1 C Δ	<sup>Zip</sup> 3283.5	Country	6.	S8.75	Additional Fee required	
LAM SON NGUYEN7. Name and Address of Current Registered Agent							
Name F201 SOMERSWORTH DV.  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, Etc.  ORLando  City  State Zip Code FL 3283							
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  REGISTERED AGENT MUST SIGN  Date  10/14/03							
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)							
Titles	Name of icers and/or Directors	or Director (Front	Street Address of Officer and/or Dir	Each	City / State / Zip		
P THAO	THAO TRUONG		7201 SOMERSWURTH DR		ORLANDO FL	3 28 3 5	
_			7	<u> </u>			
				_ <del>_</del>			
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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 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: (XI, 13 2003 (321)229-3844							
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  OUT 13, 2003 (321)229-3844  Date Daylime Phone #							

TMAO & SERVICES INC. (Thao Truong)
7201 Somersworth dr. Orlando, FL 32835.
FEI# 01~0622737

DEPARTMENTOFSTATE
Division of Corporations
409 E.Gaines St.
Tallahasse,FL 32399

Date : Oct.13,2003

To whom it may concern.

Dear Sir or Madam,

I have never received my corporation reinstate ment documentation from the Department of State. The said documentation was mailed to my agent address as follows:

ALLEN H. KATZ 2800 E.Commercial BLVD.Suite 208 Ft.Lauderdale, FL 33308.

The reason I never received these documents because myagent is far from me .It is very hard forme to contact to him, then Ichanged my agent, but I did not know that my documents are still sent to his address. This is my first and truthly mistake. Please waived all reinstatement fees of seven hundred and fifty doolars . Your corperation in assisting me to resolved this problem will be highly appreciated.

THAO TRUONG