


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS <i>20500002401</i>		FILED 05 JAN 25 PM 12:59 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # <i>P02000017739</i>					
1. Corporation Name Long Island Holdings, Inc. 842 NE 120th Street Miami, FL 33161					
2. Principal Office Address 842 NE 120th Street, Suite, Apt. #, etc.			3. Mailing Office Address 842 NE 120th Street Suite, Apt. #, etc.		
City & State Miami, FL			City & State Miami, FL		
Zip 33161	Country USA	Zip 33161	Country USA	4. Date Incorporated or Qualified To Do Business in Florida February 15, 2002	
				5. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name Charles Minutolo					
Street Address (P.O. Box Number is Not Acceptable) 2131 NE 51st Street, Suite, Apt. #, Etc. Apt 401					
City Ft Lauderdale				State FL	Zip Code 33308
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 <i>Charles Minutolo</i>				Date January 6th, 2005	
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	
P,D	Raymond W. MacDonald	842, NE 120th Street,		Miami, FL 33161	
V,T	Merrill W MacDonald	148A Old Nassau Road		Jamesburg, NJ 08831	
S,D	Charles Minutolo	2131 NE 51st Street, Apt 401		Ft Lauderdale, FL 33308	
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: <i>Raymond W. MacDonald</i>		Raymond W MacDonald		1/ 6/ 2005	(954)822-2504
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

REINSTATEMENT *03-05*

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