PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	VOLAUG 13 PM 1:41 SECRETARY OF STATE -TALLAHASSEE, FLORIDA
DOCUMENT # PO20 (000000000	
Hugh Jass, Inc	,	
2. Principal Office Address 2356 Soundings Ct. Suite, Apt. #, etc.	3. Mailing Office Address 2356 Soundings Ct. Suite, Apt. #, etc.	REMSTATEMENT 03-04
· ·	· · · · · · · · · · · · · · · · · · ·	4. Date Incorporated or Qualified To Do Business in Florida 03/25/02
West Palm Beach, 7L	West Palm Beach 7L	5. FEI Number 04 - 3626259 Applied For Not Applicable
33413 Country U.S.A.	^{zip} 33413 Country U.S.A.	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent		
Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City West Pam Beach 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.		
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		
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 Eac Officer and/or Directo	
P,V,S,T Jorge J. Sarr		71.33413 West Palm Beach, 71.
		700040246527 08/17/0401043017 ***308.75
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 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayline Phone #		

FILED

HUGH JASS, INC. 04 AUG 13 PM 1:41

2256 Soundings Court West Palm Beach, FL 33413

SECRETARY OF STATE TALLAHASSEE, FLORIDA

August 12, 2004

Division of Corporations Via: Capital Connections 417 East Virginia Street Suite 1 Tallahassee, FL 32302

To Whom It May Concern:

Enclosed please find the Reinstatement form for Hugh Jass, Inc.

In speaking to someone at your department, I was told that I was able to waive the actual reinstatement fee since there was an error in my address that was not corrected. I did not receive renewal information and therefore was not aware/reminded that I had to perform these.

I have enclosed a fee to reinstate and apply for the 2003 and 2004 renewals.

Thank you for your time.

Jorge J. Sarria, President