941-625-7641

FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

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SIGNATURE:

SECRETARY OF STATE DIVISION OF CORPORATIONS DOCUMENT # 702000037154 04 FEB -2 AM 8:00 . Reach out International, Inc. DO NOT WRITE IN THIS SPACE REINSTATEMENT 03-04 3. Mailing Address 779 Tamiami 2. Principal Place of Business 779 Tamiami Trail Suite, Apt. #. etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State
Fort 4. FEI Number charlotte FI Port charlotte 33 1001633 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 33952 7. Name and Address of Current Registered Agent DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable)
4550 mongite Rd IN THIS SPACE City North Port 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) January 1.- May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS CE0 TITLE CR2E034B (12/01 THUE Bartolotta mongite Rd Acom NAME NAME 700028013747 02/02/04--01061--014 **300.00 4550 STREET ADDRESS STREET ADDRESS North CITY - ST- ZIP 34287 CITY-ST-ZIP BILE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C/TY-ST-Z/P NAME MAME STREET-ADDRESS STREET ADDRESS DO NOT WRITE CHY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-7/P CITY-ST-ZIP DILE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. Thereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119,07(3)(i). Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Reach Out International, Inc. 779 Tamiami Trail
Port Charlotte, FL 33953

Doc#: P02000037154

January 19, 2004

To Whom It May Concern,

Please accept the 2003 and 2004 Uniform Business Report as timely filed with our check for \$ 300.00

The 2003 UBR report was our first filing requirement. We never received the original form. We were unaware of the filing requirement. During our year end review we were advised that we had not complied with this matter. Please accept the enclosed check for \$ 300 to reinstate our corporation.

Thank you,

Adam Bartolotta

President