2005 FOR PROFIT CORPORATION REINSTATEMENT

KEINSTATEMENT										
DOCUMENT # P02000038267							FILED			
1. Entity Name POLARIS 3 SURVEYORS & MAPPERS, INC.								- m		
POLANIS S SURVETORS & MAPPERS, INC.						05	OCT 14 PM	3: 54		
Principal Place	of Business	3	Mailing Address	Mailing Address			CTET!	TATE	• -	
3900 NW 79TH AVENUE, 327				3900 NW 79TH AVENUE, 327				1,2		
MIAMI, FL 33166 US			MIAMI, FL 33166	MIAMI, FL 33166 US						
2. Principal Place of Business 3900 NW 79 AVE.			3. Mailing Address	3. Mailing Address 3900 NW 19 AVE.					Efile Eli	
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			REIN-P	CR2E098 (6/0	۵۱	
935				<i>J</i> 35 City & State					Applied For	
City & State MIAMI FL			MIAMI,	1 5			er 0885		Not Applicable	
Zip		Country USA	Zip	Country USA		5. Certificate	of Status Desired		Additional	
33166			33166 ent Registered Agent	1 05/	4	7. Name and	Address of New Regis	Fee Requ	Jirea	
Name										
IZQUIERDO 11880 SW 4				Street Address			(P.O. Box Number is Not Acceptable)			
MIAMI, FL					:					
								⊏I Zip C	`odo	
City							Manufacture and the second sec	TL		
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. I am familiar with, and accept the obligations of registered agent.										
CIGNATURE										
SIGNATURE Signature, typed or printed name of registered agent and litle if applicable. (NOTE: Registered Agent alguature required when reinstating) DATE										
FILE NOW!!! FEE IS \$150.00 After January 1, 2006, Fee will be \$300.00 In accordance with s. 607.193(2)(b), F.S. corporation did not receive the prior not										
10.	D. OFFICERS AND DIRECTORS 11.						CHANGES TO OFFICE	RS AND DIRECT	ORS IN 11	
	P	O DALII	☐ Delete	☐ Delete TITLI		Z			ge Addition	
NAME IZQUIERDO, RAUL STREET ADDRESS 11880 SW 46 ST				STREET ADDRESS			[47 U 5J1U71-	U1b **	[50.00	
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CITY-ST-ZIP CITY-ST-ZIP										
12. I hereby certify that the information supplied with this filing does not qualify 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 eath; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.										
SIGNATURE: X Rd 7 (President) X 10-10-2005 305-463-0912										
SIGNATURE AND YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #										
Raul Izquierdo										



Lester Barreras c.p.a., p.a.

October 4, 2005

Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Polaris 3 Surveyors & Mappers, Inc.

Dear Sir or Madam,

We are the accountants for the above referenced company and have been requested to respond to you on their behalf.

Our client informed us that his corporation's status is listed as "inactive" at the Division of Corporations and requested that we research why. It came to our attention that our client had a change of address in 2004 which may have caused a delay and/or an interference with the postal office; therefore our client has not received any Annual Report Notices since then. The correct mailing address that should be listed is:

Polaris 3 Surveyors & Mappers, Inc. 3900 N.W. 79 Ave., Ste. 235 Miami, FL 33166

Because of this, we are respectfully requesting that our client does not get penalized the reinstatement fee. Our client would like to pay for this year's annual report at the original cost of \$150 per year (2005). Enclosed is a check in the amount of \$150.00 for this current year's Annual Report.

Should you have any questions, please feel free to contact our office at your earliest convenience.

Sincerely,

LESTER BARRERAS, C.P.A., P.A.

ester Barreras, C.P.A

R/olh