PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE **CORPORATION** 03 DEC -2 AM 9:54 Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE. FLORIDA PO2000064187 DOCUMENT # 1. Corporation Name BRIANNA INVESTMENT GROUP, INC REINSTATEMENT_03____ 2. Principal Office Address
1555 WW 70 WW 3. Mailing Office Address PO BOX 771 724 Suite, Apt. #, etc. COBAL SPRINGS MARGATE 4. Date Incorporated or Qualified To Do Business in Florida City & State 33077 1724 5. FEI Number 0736 303 CERTIFICATE OF STATUS DESIRED X S8.75 Additional Fee required USA 7. Name and Address of Current Registered Agent 500025160815 12/02/03--01046--011 **150 ALVAREL Street Address (P.O. Box Number is Not Acceptable) WW 16 CT Suite, Apt. #, Etc. Zip Code 33 063 MARGATE 8. I, being appointed the registered agent of the above partied corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. 11-18-03 Signature of Registered Agent BEGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Titles Street Address of Each City / State / Zip MANGATE, 12.33,563 Ples LOUIS ALVANEZ 6237 NW 16 CA
LOUIS STALKER 1555 NW 70 MW 6237 NW 16cr MANGATT, H. 33063 417 host AVE AIZABETH, NJ 07206 ALVANEZ 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: Daytime Phone #

July 28, 2003

Florida Department Of State **Division of Corporations** PO Box 6327 Tallahassee, FL 32314

RE: Brianna Investment Group Inc EIN# 01-0736303

To Whom It May Concern:

Please be advised that we never received the application for the Annual Corporate Fee of \$150.00. If we had received the application we would have paid it on time. Our address has not changed since the beginning of our corporation.

At this time please accept the \$150.00 to reinstate the corporation.

Couis armer

1555 NW 70 H LN MANGATE A. 33063