

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 10 AM 9:43

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P02000064380

1. Corporation Name

INTERNATIONAL AVIATION CHEMICAL INC.

Principal Place of Business

1355 BENNETT DRIVE
UNIT 253
LONGWOOD FL 32750

Mailing Address

1355 BENNETT DRIVE
UNIT 253
LONGWOOD FL 32750

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

~~1355 BENNETT DRIVE~~
Suite, Apt. #, etc.
UNIT 253

City & State
LONGWOOD, FL. 32750

Zip Country
USA

3. New Mailing Office Address, If Applicable

~~1355 BENNETT DRIVE~~
Suite, Apt. #, etc.
UNIT 253

City & State
LONGWOOD, FL. 32750

Zip Country
USA

4. Date Incorporated or Qualified To Do Business in Florida

06/11/2002

5. FEI Number

35-2028457

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
FD	MICHAEL NICHOLAS	1355 BENNETT DR (UNIT 253)	LONGWOOD, FL 32750

700023713377
10/10/03 01076 000 **150.00

8. Name and Address of Current Registered Agent

NICHOLAS, MICHAEL
1355 BENNETT DRIVE
UNIT 253
LONGWOOD FL 32750

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City State Zip Code
FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent

~~SIGNATURE REQUIRED~~
REGISTERED AGENT MUST SIGN

Date

10/9/03

11. 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:

~~SIGNATURE REQUIRED~~
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

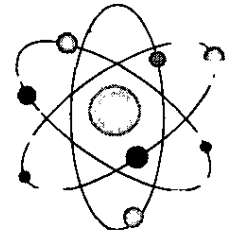
Date

10/9/03

Daytime Phone #

CR2E040 (7/03)

I.A.C. Inc.



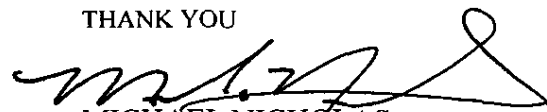
ALL PRODUCTS MADE IN THE U.S.A. KEEPING AMERICA CLEAN AND SAFE

OCTOBER 9, 2003

TO WHOM IT MAY CONCERN:

OUR COMPANY RECENTLY RECEIVED A NOTICE OF DISSOLUTION FROM THE FLORIDA DEPARTMENT OF STATE. WE UNDERSTAND THAT COMPLIANCE WITH THE ANNUAL UNIFORM BUSINESS REPORT IS ESSENTIAL TO MAINTAIN OUR CORPORATE STATUS WITH THE DIVISION. AS OF TODAY'S DATE WE ARE NOT IN RECEIPT OF THE ORIGINAL UNIFORM BUSINESS REPORT FORM FOR 2003. CURRENTLY WE ARE HAVING PROBLEMS WITH OUR MAIL IN ROUTE TO US FROM THE UNITED STATES POST OFFICE IN LONGWOOD, FL. PLEASE FEEL FREE TO CONTACT USPS FOR CONFIRMATION OF THIS STATEMENT. WE SINCERELY APOLOGIZE FOR THE DELAYED PROCEDURES IN PROCESSING AND WOULD ASK THAT THE DIVISION OF CORPORATIONS REINSTATE OUR CORPORATION.

THANK YOU



MICHAEL NICHOLAS