

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

05 JAN 13 PM 1:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P02000073511**

1. Corporation Name

UNITED TREE INTERNATIONAL, INC.

2. Principal Office Address

1995 N.W. 193 Avenue

Suite, Apt. #, etc.

City & State

Pembroke Pines, FL

Zip

33029

Country

USA

3. Mailing Office Address

1995 N.W. 193 Avenue

Suite, Apt. #, etc.

City & State

Pembroke Pines, FL

Zip

33029

Country

USA

REINSTATEMENT

03-05

**4. Date Incorporated or Qualified
To Do Business in Florida**

07/03/2002

5. FEI Number

113649047

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Lawrence Levy, Esquire

Street Address (P.O. Box Number is Not Acceptable)

12555 Orange Drive

Suite, Apt. #, Etc.

Suite 215

City

Davie

State

FL

Zip Code

33330

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

[Signature]
REGISTERED AGENT MUST SIGN

Date

1/12/05

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 Each Officer and/or Director	City / State / Zip
OID	James Smith	1995 N.W. 193rd Avenue	Pembroke Pines, Florida 33029

500045660355
01/31/05--01017--010 **458.75

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

Date

1/12/05

Daytime Phone #

(954) 986-9996

CR2E081 (01/05)

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UNITED TREE INTERNATIONAL, INC.
1995 N.W. 193RD Avenue
Pembroke Pines, FL 33029

January 12, 2005

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

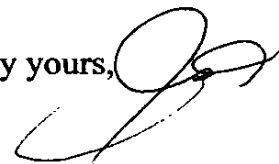
RE: Waiver of reinstatement fee
United Tree International, Inc.
Document # P02000073511

Dear Sir or Madam:

I am the president and sole shareholder of United Tree International , Inc. I have submitted to the Division of Corporations an application for corporate reinstatement.

I did not receive the annual business report for 2003 or 2004. Accordingly, I respectfully request that you waive the \$600.00 reinstatement fee. Thank you.

Sincerely yours,



James Smith,
President
United Tree International, Inc.