## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORMS 1012

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 04 MAR -4 PH 2: 29			
DOCUMENT # P02000097771  1. Corporation Name					SECRETARY OF STATE TALLAHASSEF, FLORIDA		
GLOBAL INSTALLATIONS, INC.							
•	Office Address V 62 TERR	<u></u>		3. Mailing Office Address 1850 NW 62 TERR			
Suite, Apt. #, etc. Suite, Apt. #					4. Date Incorporal To Do Business	ted or Qualified s in Florida 09-10-2002	,
City & State MIAMI, FL			City & State MIAMI, FL		5. FEI Number 04-3714036	nber Applied For	
Zip Co 33147		ntry	Zip 33147	Country			Additional Fee required a Certificate of Status
7. Name and Address of Current Registered Agent							
	Name BLANCA R. SERRANO						
	Street Address (P.O. Box Number is Not Acceptable) 1850 NW 62 TERR				201 03/12/0	00303831 0401050026	852 **600.00
	Suite, Apt. #, Etc.						
	City MIAMI					State Zip Code S13147	
8. I, being appointed the registered agent of the above named corporation, am termiliar with and accept the obligations of section 607.0505 or 617.0503, F.S.  Signature of Registered Agent A Blanco General August Signature  Date							
Registered Agent							
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)							
Titlets	Off	Name of icers and/or Directors	Street Address of Each Officer and/or Director			City / State / Zip	
P/D	BLANCA R. SERRANO		1850 NW 62 TERR		N	MIAMI, FL 33147	
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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 817, F.S. I further certify that when filling 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 118.07(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: X Blazza C Lawron.							
SIGNA	TURE: X	Blaver	a Ser	rano		Andre Pouli	na Chura A

pope 202

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

DUE TO A CHANGE OF ADDRESS I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR THE 2003 UNIFORM BUSINESS REPORT (FIRST NOR SECOND NOTICE OF THE UBR).

PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT MY CORPORATION IN ITS ACTIVE STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER.

**CORDIALLY** 

BLANCA R. SERRANO

**PRESIDENT**