

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 DEC -3 AM 8:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 04/03

DOCUMENT # P0200011146

1. Corporation Name
SYLVIA EQUITIES, INC.

2. Principal Office Address
19380 COLLINS AVE

3. Mailing Office Address
C/O LH ROSOFF & CO LLP

Suite, Apt. #, etc.
APT 1124

Suite, Apt. #, etc.
81 WATERMILL LANE

City & State
SUNNY ISLES BEACH, FL

City & State
NEW YORK, NY

4. Date Incorporated or Qualified
To Do Business in Florida 10/15/02

5. FEI Number
56-2301306

Applied For
Not Applicable

Zip Country
33160 US

Zip Country
11021 US

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
IAN REISNER

Street Address (P.O. Box Number is Not Acceptable)
19380 COLLINS AVE

Suite, Apt. #, Etc.
APT 1124

City
SUNNY ISLES BEACH

State Zip Code
FL 33160

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 _____ Date _____
REGISTERED AGENT MUST SIGN

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
PRES	IAN REISNER	19380 COLLINS AVE, APT 1124	SUNNY ISLES BCH, FL 33160

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12/03/04--01048--001 **150.00

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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 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: *Jan Reiser*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E081 (01/04)

Ian Reisner
Sylvia Equities Inc.
c/o LH Rosoff & Co, LLP
81 Watermill Lane
Great Neck, NY 11021

November 30, 2004

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

RE: Sylvia Equities, Inc.
FEI # 56-2301306

To Whom It May Concern:

I am writing to you regarding the enclosed annual filing. I moved to a new apartment during 2004 and have had trouble with my mail ever since. I always pay our tax liabilities timely and did not intentionally disregard the law. I respectfully request that you abate the reinstatement fee. I have enclosed the annual fee of \$150.

Thank you for your attention to this matter.

Very truly yours,



Ian Reisner
President