

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
DIVISION OF CORPORATION
04 SEP 29 AM 8:29

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P02000116324

1. Corporation Name
ICU Surveillance Corporation

2. Principal Office Address
7932 S.W. 148 AVE.
Suite, Apt. #, etc.

3. Mailing Office Address
7932 S.W. 148 AVE
Suite, Apt. #, etc.

City & State

Miami

Zip
33193

Country

USA

City & State

Miami

Zip

33193

Country

USA

REINSTATEMENT 03-04

4. Date Incorporated or Qualified To Do Business in Florida
Oct 29, 2003

5. FEI Number
04-37-33457

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

7. Name and Address of Current Registered Agent

Name
Dwight E. Bell

Street Address (P.O. Box Number is Not Acceptable)
7932 S.W. 148 AVE

Suite, Apt. #, Etc.

City
Miami, FL

State
FL

Zip Code
33193

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
Sept 20, 2004

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
President	Dwight E. Bell	7932 S.W. 148 AVE Miami, FL 33193	Miami - Florida 33193
Secretary	Tiara L. Leavitt	7932 S.W. 148 AV.	Miami FL 33193

900041452329
09/23/04--01061--004 **300.00

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] / Dwight Bell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 09/20/2004 (305)387-1004
Daytime Phone #

CR2E081 (01/04)

September 28, 2004

Re: Document #P020000116324
ICU Surveillance Corp.

To Whom It May Concern:

I would like at this time to ask for consideration on the following: I never received any documents pertaining to my corporation, when my wife was looking on line she went and checked out copra. License, she noticed it stated it was inactive, we immediately called and was told that the License was cancelled because we never paid the Corp. fee, however we never received anything to that effect.

When we called we were told to send a letter for consideration and a check in the amount of \$300.00 and that we would be informed of a decision.

I hope that you can find it in your heart to please reconsider and re-instate our Corp Lick.

We did have some problems with mail fraud; the inspector on our case was Barry Mew.

If you should require additional information, please do not hesitate in contacting me at 305-387-1004.

Sincerely,
Dwight Bell