PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P02000117313

1. Corporation Name

SLATE MODEL & TALENT MANAGEMENT, INC.

Principal Place of Business

Mailing Address

202 WILSHIRE BLVD-CASSELBERRY FC 32707

SIGNATURE:

202 WILSHIRE BLVD.
CASSELBERRY FL 32707

DIVISION OF CORPORATIONS

03 OCT 13 AM 8:00

Date

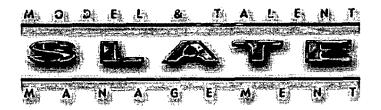
Daytime Phone #

If above addresses are incorrect in any way, line through incorrect	information and enter co	orrection below.	REINS	TATEME	NT 03
2. New Principal Office Address, If Applicable 3. New Mai 8018 Sunport Dr. Suite Ant. #. etc. Suite Ant. #.	ling Office Address, If A		Date Incorporated or Qualified To Do Business in Florida		11/01/2002
Suite 203 Suit City & State Or lando FC Or la	rdo,fl	203),FL }		5. FEI Number Applied For Not Applicable 6.	
^{Zip} 32819 Country Zip 328	Country Country	···	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 (Floratives) Name of Officers and/or Directors 2	Stree	ons must list at lease at Address of Each er and/or Director	t 3 directors) City / State / Zip 4		/ State / Zip
presont michelle Sorrells	1741 NOA	th Shore	Terraca	orando	FZ 32819
		***************************************	ום?	7023750 0301065023	54 r
		- 	10/13/()301065023 	**150.00
Name and Address of Current Registered Ag	ent		9. Name and A	Address of New Registe	red Agent
CAL ACTIVE CERTIFICATION NO.		Name			
G&L AGENT SERVICES, INC. 390 NORTH ORANGE AVE., STE.600		Street Address (P.O. Box Number is Not Acceptable)			
ORLANDO FL 32801		Suite, Apt. #, Etc.			
	City		State Zip Code FL		
10. I, being appointed the registered agent of the above named corporation of the above named	oration, am familiar with		ligations of Section	Date	0505, F.S.
REGISTERED A	SENT MUST SIGN				

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



October 11, 2003

To whom it may concern,

This letter is to inform the Florida Dept. of State that Corporation named Slate Model and Talent did not receive the Uniform Business Report Notices. Please consider our corporation back to Active status. Thank you for your time, and consideration.

Sincerely,

Michelle Sorrells, president

Slate Model and Talent Management