

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 JUL 26 PM 2:18

DOCUMENT # P02000118858

1. Corporation Name
SCOTT W. HOLLAND, INC.

2. Principal Office Address
4775 COLLINS AVENUE

3. Mailing Office Address
4775 COLLINS AVENUE

Suite, Apt. #, etc.
#1104

Suite, Apt. #, etc.
#1104

City & State
MIAMI BEACH, FL

City & State
MIAMI BEACH, FL

Zip Country
33140 USA

Zip Country
33140 USA

REINSTATEMENT 03-04

4. Date Incorporated or Qualified
To Do Business in Florida NOVEMBER 4, 2002

5. FEI Number Applied For
56 - 2302473 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
SCOTT W. HOLLAND

Street Address (P.O. Box Number is Not Acceptable)
4775 COLLINS AVENUE

Suite, Apt. #, Etc.
STE # 1104

City
MIAMI BEACH

State Zip Code
FL 33140

300039527253
07/26/04 01045 005 **300.00

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 7/22/04

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
P	SCOTT W. HOLLAND	4775 COLLINS AVE, #1104	MIAMI BEACH, FL 33140

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]* Date 7/22/04 Daytime Phone #

CR2E081 (01/04)

M. TACHIBANA, C.P.A., P.A.

MEMBER - AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS • FLORIDA INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS

July 21, 2004

• Department of State
• Division of Corporations
• P.O. Box 6327
Tallahassee, Florida 32314

**RE: SCOTT W. HOLLAND, INC. (P02000118858)
CORPORATION REINSTATMENT**

Dear Sir/Madam

My client, Scott W. Holland, President of the abovementioned company, was not in the United States during 2003 and as such did not receive the Annual Report renewal notice. As it was also his first year of incorporation, he was not aware of the Annual Report filing requirements until we informed him this year 2004.

As such, we are now submitting the form for Corporation Reinstatement and enclose a check in the amount of \$300 being the annual report fee for 2003 and 2004.

Please accept this payment and kindly process his request for reinstatement.

We would greatly appreciate your kind understanding and cooperation in this matter.

Very Truly Yours,



M. Tachibana, C.P.A

enc.