

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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06 JUL 19 PH 3:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT 04-06-05

DOCUMENT # P02000126009

1. Corporation Name
UNIVERSAL UNLIMITED GROUP, INC.

2. Principal Office Address 5783 SW 40 STREET		3. Mailing Office Address SAME	
Suite, Apt. #, etc. STE: 158		Suite, Apt. #, etc.	
City & State MIAMI, FL		City & State	
Zip 33155	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida **11/27/2002**

5. FFL Number **03-0503282**

Applied For	Not Applicable
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6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
HILDA ENRIQUEZ

Street Address (P.O. Box Number is Not Acceptable)
5783 SW 40 STREET

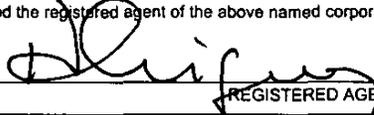
Suite, Apt. #, Etc.
STE: 158

City
MIAMI

State
FL

Zip Code
33155

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 _____

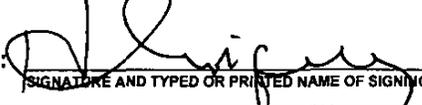
REGISTERED AGENT MUST SIGN

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
P/D	HILDA ENRIQUEZ	5783 SW 40 STREET #158	MIAMI, FL 33155

800077922718
07/21/06--01012--002 **450.00

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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR _____ Date _____ Daytime Phone # _____

UNIVERSAL UNLIMITED GROUP, INC.

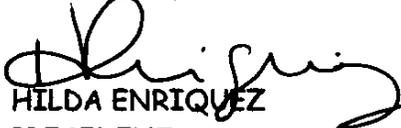
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TO: DIVISION OF CORPORATION
P.O. BOX 6327
TALLAHASSEE, FL 32314

AS PER OUR PHONE CONVERSATION I AM SENDING TO YOU THIS LETTER OF EXPLANATION AND THE UBR FORM ALONG WITH A CHECK TO PROPERLY UPDATE CORPORATION I FURTHER STATE THAT I DID NOT RECEIVE THE NOTICE FOR 2004 UBR FIRST NOR SECOND NOTICE. I WOULD LIKE TO RESOLVE THIS ISSUE, PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

I HAVE A NEW MAILING ADDRESS PLEASE MAKE A NOTE OF IT.

CORDIALLY,


HILDA ENRIQUEZ
PRESIDENT