


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 NOV 15 AM 9:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000040228

1. Corporation Name
E X R FISH INC
1018 NW 10th AVE
FT LAUDERDALE FL 33311

2. Principal Office Address 1018 NW 10 th AVE Suite, Apt. #, etc. City & State FT LAUDERDALE FL Zip 33311 Country		3. Mailing Office Address Suite, Apt. #, etc. City & State Zip Country	
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REINSTATEMENT
CR2E081 (8/05) 64-08

4. Date Incorporated or Qualified To Do Business in Florida 04/09/03
5. FEI Number 13-4248537 Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name RICHARD LAI	
Street Address (P.O. Box Number is Not Acceptable) 1018 NW 10 th AVE	
Suite, Apt. #, Etc.	
City FT LAUDERDALE	State FL Zip Code 33311

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]* Date *11/2/05*

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.	RICHARD LAI	1018 NW 10 th AVE	FT LAUDERDALE FL 33311
	<i>[Signature]</i>		

500061439735
11/15/05--01046--013 **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]* Date *11/2/05* 1954-7642898
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

E & R FISH INC.
1018 NW 10th Avenue
Ft Lauderdale, Florida 33311

November 2, 2005

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

Reference: Corporation Reinstatement (Document #P03000040228)

Dear Sir/Madam,

Enclosed is the Corporation Reinstatement form for E & R Fish Inc. and a \$300 check represents filing fees for 2004 and 2005. Annual reports for those years were never received. Therefore, we respectfully request abatement of the penalty. New policy had been placed to ensure that future filings will be timely. If there is any question, please call me at 305-793-0443.

Sincerely,

A handwritten signature in black ink, appearing to read 'Richard Lai', is written over a horizontal line.

Richard Lai
President