

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
04 OCT 25 PM 12:08

TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P03000095145 1. Corporation Name M.E.F. OF BOCA, INC.			
2. Principal Office Address 862 SE 1ST AVE State, Apt. #, etc.		3. Mailing Office Address State, Apt. #, etc.	
City & State DEERFIELD BCH, FL		City & State 	
Zip 33441	Country USA	Zip 	Country

500042703565
11/12/04--01069--013 **150.00

4. Date incorporated or Qualified To Do Business in Florida 8/29/03	
5. FEI Number 20-0409561	Applying For Full Approval
6. CERTIFICATE OF EXISTENCE DESIRED <input type="checkbox"/>	

7. Registered Address of Resident Registered Agent Name DEBBIE WILSON Street Address (P.O. Box, Street or Post Office Box) 862 SE 1ST AVE State, Apt. #, etc. DEERFIELD BEACH		State FL	Zip Code 33441
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8. I, being appointed the registered agent of this state, do hereby certify that the corporation is in compliance with the provisions of sections 607.005 and 607.006, F.S.			
Signature of Registered Agent Deborah Wilson		Date 10/21/07	
9. Names and Street Addresses of Each Officer and Director of this corporation (do not list at least 3 directors)			
Title	Name of Officer or Director	Street Address of Each Officer and/or Director	City / State / Zip
P	DEBBIE WILSON	862 SE 1 ST AVE	DEERFIELD BCH, FL 33441
10. I certify that I am an officer or director of this corporation or have been appointed to execute this application as provided for in chapter 607, F.S. I have duly executed this application, and I have caused it to be signed by each officer or director of this corporation. This application complies with the requirements of sections 607.005 and 607.006, F.S. The corporation has paid the fee and the state of Florida has accepted this application. This form does not qualify for an extension under section 119.07(2)(b), F.S. The provisions of this application shall have the same legal effect as if made under oath.			
SIGNATURE: Deborah Wilson		Date 10/21/07	

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

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED OUR ANNUAL REPORT FORM FOR 2004 FROM YOUR OFFICE TO PAY THE UNIFORM BUSINESS REPORT. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS CORPORATION IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY,



DEBBIE WILSON
PRESIDENT