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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>CORPORATION REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State Division of Corporations	
DOCUMENT # <b>P03000104721</b> 1. Corporation Name <b>PROLIFIC DESIGNS, INC.</b>			
2. Principal Office Address <b>862 SE 1<sup>st</sup> AVE</b> <small>State, Apt. #, etc.</small>		3. Mailing Office Address <b>SAME</b> <small>State, Apt. #, etc.</small>	
City & State <b>DEERFIELD BCH, FL</b> Zip <b>33441</b>		City & State <small>Country</small>	

100042699561  
11/12/04--01069--012 \*\*150.00

4. Date incorporated or Qualified To do Business in Florida <b>9/24/2003</b>	
5. FEI Number <b>20-0413221</b>	Applies For <input type="checkbox"/> Not Applicable
6. Certificate of Status Desired <input type="checkbox"/>	

7. Name and Address of Current Registered Agent Name <b>DIANNE CIOTOLI</b> Street Address (P.O. Box Number is Not Permitted) <b>862 SE 1<sup>st</sup> AVE.</b> City, State, Zip <b>DEERFIELD BEACH</b>		State <b>FL</b>	Zip Code <b>33441</b>
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8. I, being registered the foregoing agent of the above Florida corporation, am familiar with and accept the obligations of section 607, 608 or 617, F.S. Signature of Registered Agent <b>Deborah Wilcox</b> Date <b>10/21/04</b>			
9. Name and Street Address of Each Other member Director (Please complete this section for all directors)			
Index	Name of Director member Director	Street Address of Each Director member Director	City / State / Zip
P	DIANNE CIOTOLI	862 SE 1 <sup>st</sup> AVE	DEERFIELD BCH, FL 33441

10. I certify that I am an officer or director of the corporation or Florida corporation to incorporate this application; no payment has been made for the original \$57 or \$17, F.S. I further certify that I have filed this application, application, statement for qualification, and certificate of incorporation with the appropriate state officials the requirements of section 607, 608 or 617, F.S., that all fees due the corporation have been paid and the names of individuals listed on this form do not qualify for incorporation under section 608, 609, F.S. The information submitted on this application is true and correct, and my signature electronic the same legal effect as if made in ink.

SIGNATURES **Deborah Wilcox** **10-21-04**

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,

  
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DIANNE CIOTOLI  
PRESIDENT