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APPROVE
AND
FILE

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

06 APR 24 AM 8:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PO4000108056

1. Corporation Name

DAN FELLER & ASSOCIATES, PA.

REINSTATEMENT 05-06 PSC

CR2E081 (12/05)

2. Principal Office Address

382 Carrington Dr.

Suite, Apt. #, etc.

3. Mailing Office Address

382 Carrington Dr.

Suite, Apt. #, etc.

City & State

Weston, FL

City & State

Weston, FL

Zip

33326

Country

Zip

33326

Country

4. Date Incorporated or Qualified To Do Business in Florida

7/21/04

5. FEI Number

651229826

Applied For

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

DAN FELLER

100073770791

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

382 Carrington Drive

05/03/06-01001-018 **150.00

Suite, Apt. #, Etc.

City

Weston

200073770942

05/03/06-01001-019 **150.00

FL

33326

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

Daniel Feller

Date

4-20-05

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
<u>P/d</u>	<u>Dan Feller</u>	<u>382 Carrington Dr.</u>	<u>Weston, FL 33326</u>

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:

Daniel Feller

Daniel Feller

4/20/06

Date

954-873-6570

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Dan Feller & Associates, PA

382 Carrington Drive
Weston, FL 33326
954-217-0582

April 20, 2006

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

I originally opened my new corporation in 2004 with help of my accountant, but was unaware that I had to pay a \$150.00 fee each year, nor did I receive any notice.

As per instructions from your office I am mailing this letter with the filing fee for 2005 and am asking that you waive any penalty fees. Additionally, I am enclosing a second check for the \$150.00 for the 2006 year.

Thank you for your consideration.

Daniel Feller

