PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	working the transfer of the		THO THIS LOINN.
- CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATI		02 DEC 30 PM 12: 30
Name of the second	Secretary of State DIVISION OF CORPORATIONS		SECRETION OF STATE TALLAMANSEE FLORIDA
document # $P930$	00019057		The second secon
1. Corporation Name	ANDSCAPE DESIGNS, IN	۵ ا	•
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		7 C 12/30	00009734987 /0201031008 **158.75
2. Principal Office Address 4195 PARK AVENUE	3. Mailing Office Address 4195 PARK AVENUE	201 22	. 25 2521 000 **130:13
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4 Date Inco	rporated or Qualified
City & State	City & State	To Do Bu	porated or Qualified siness in Florida 2/23/93
ZIp Country	Zip Country	5. FEI Numb	Applied For Not Applicable
33/33 USA	33133 USA	6. CERTIFICAT	E OF STATUS DESIRED \$8.75 Additional Fee require for a Certificate of Status
Name	7. Name and Address of Current Regis	tered Agent	
Farance	BILBAO		
Street Address (P.O. Box Number is N	Not Acceptable		
Suite, Apt. #, Etc.			
City #			
Mami		. ,	State Zio Code FL 33/33
8. I, being appointed the registered agents the abo	ove named corporation, am familiar with and accept the	obligations of secti	
Signature of		,	011 007 0303 01 017 0303, F.S.
Registered Agent Ri	EGISTERED AGENT MUST SIGN		Date
9. Names and Street Addresses of Each Officer and	d/or Director (Florida nonprofit corporations must list at	Inact 3 directors)	
Titles Name of Officers and/or Directors	Street Address of Fa		
PRES EDVARDO BILBAC		ENVE	MIAMI FL 33/33.
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owed by the corporation have been paid and the r	iver or trustee empowered to execute this application as olution has been aliminated, the corporate name satisfic names of indicatuals listed on this form do not qualify fo ignature shall have the same legal effect as if made und	sa me requirements	pter 607 or 617, F.S. I further certify that when filing of section 607.0401 or 617.0401, F.S., that all fees er section 119.07(3)(i), F.S. The information indicated
SIGNATURE:	Eduardo A.	160	4/4/4 705/666-0920
OFFICION AND TIPED OR PR	NTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #

g1/2

EDWARD BILBAO LANDSCAPE DESIGNS, INC. 4195 PARK AVENUE MIAMI, FL 33133

(305-666-0930)

December 10, 2002

State of Florida **Division of Corporations** Annual Report/ Reinstatement Section PO Box 6327 ---Tallahassee, FL 32314-6327

RE: 2001 Corporation Reinstatement for Document # P93000019057

Dear Sir/Madam,

Please accept the enclosed corporation reinstatement UBR for the year 2002 accompanied with check number 2432 for \$158.75 which is for the \$150 annual fee and \$8.75 for a certificate of status.

Please be advised that upon inquiring for credit it was brought to our attention that we were not active because of the non-filing of the 2002 UBR. Please also be advised that we no record of having received this document.

Kindly please accept this reinstatement filing accompanied with payment and abate the penalty fee for reinstatement. We are a very small company and to pay the penalty would truly financially burden us additionally more than we already are.

Additionally, please be advised that upon bringing this matter to the attention of our CPA he informed us that we are responsible for filing the report annually even though we may not receive the prescribed form. Furthermore, he also advised us that should you extend consideration it would only be for this one time. We hereby acknowledge both circumstances.

We thank you in advance for your cooperation in addressing this letter and any consideration you may extend.

Sincerely,

Eduardo Bilbao, President