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CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 01 OCT -8 PM 2:38 SECRETARY OF STATE TALLAHASSEE, FLORIDA 000004642020--4 -10/18/01--01060--017 ****158.75 ****158.75	
DOCUMENT # <u>P94000038912</u>					
1. Corporation Name <u>Inira Prestige Inc.</u>					
2. Principal Office Address <u>4100 W12 AVE</u>		3. Mailing Office Address <u>4100 W12 AVE</u>			
Suite, Apt. #, etc. <u>B</u>		Suite, Apt. #, etc. <u>B</u>			
City & State <u>Hialeah FL</u>		City & State <u>Hialeah FL</u>			
Zip <u>33012</u>	Country <u>USA</u>	Zip <u>33012</u>	Country <u>USA</u>	4. Date Incorporated or Qualified To Do Business in Florida <u>5-24-94</u>	
5. FEI Number <u>050496483</u>				Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status					
7. Name and Address of Current Registered Agent					
Name <u>IRMA HATEM</u>					
Street Address (P.O. Box Number is Not Acceptable) <u>4801 SW 141 AVE</u>					
Suite, Apt. #, Etc. <u></u>					
City <u>MIRAMAR</u>				State <u>FL</u>	Zip Code <u>33027</u>
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 <u>IRMA HATEM</u> REGISTERED AGENT MUST SIGN Date <u>10/2/01</u>					
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</u>	<u>IRMA HATEM</u>	<u>4801 SW 141 AVE</u>		<u>MIRAMAR, FL 33027</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 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: <u>IRMA HATEM</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date <u>10/2/01</u> Daytime Phone # <u>305-823-3883</u>					



ROSSIE NAIL TECH SCHOOL

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To whom it may concern,

This letter is to clarify why renewal was never filed. On our last renewal I changed my registered agent address thinking that this would be sent to me since all the addresses were the same. Therefore we never received the renewal and realized now that our state license came up for renewal and they always request a copy of the check certifying that all corporation status is up to date we realized a check was never sent because the renewal forms were never received by me. I called and they told me to send the enclosed \$150.00 with the form, which I downloaded, and this attached letter. Sorry for the mix up but I was not aware I had to change all addresses printed as well.

If any more information is needed feel free to contact me at (305) 823-3883

Thank You

Irma Hatem
President