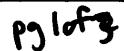
## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.





FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

1. Corporation Name

TMI INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

103 MININEHAHA CIRCLE MAITLAND FL 62751 TOS MINNEHAHA-GIRGLE

-- MAÎTLAND FL 32751

FILED

02 MAR 26 AM II: 02

SECRETARY OF STATE TALLAHASSEE. FLORIDA

If above a	ddresses are incorrect in any way, line thr	ough incorrect in	nformation a	nd enter correction below.	0,	VOV.	N		
				Idress, If Applicable	Date Incorporated or Qualified     To Do Business in Florida     12/09/1994				
Suite, Apt. #, etc. Suite, Apt. #			etc.		⊇5≍FEl Numbéi			Applied For	<del>_ =</del>
City & State		City & State			6.	59-3281740		Not Applicab	
$\mathcal{M}_{Zib}$	IN Country SA	Zip		Country	·	OF STATUS DESIRED		Additional Fee requi Certificate of Status	
7. Names a	and Street Addresses of Each Officer and	or Director (Flo	rida nonprof	it corporations must list at lea	st 3 directors)	-			
Title(s)	Name of Officers and/or Directors		3	Street Address of Each Officer and/or Director		4	City / State /	/ Zip	
P	LEE, THOMAS J			VEHAHA CIRCLE	MAITLAND FL 32751				
			<b>.</b>				020	192 1011009 ****150.00	7
		-					ب يعن مسب	• ••••	
					20	00054 -05/02/02	91:	327 11010	_hd s
						***************************************	J\\	***150.00 <u></u>	4.4.4
							10		ŀ
	8. Name and Address of Current	Registered Age	ent		9. Name and Address of New Registered Agent				
				Name		<u> </u>	)		1
LEE, THOMAS J 103 MINNEHAHA CIRCLE MAITLAND FL 32751				Street Address (P.O. Box Number is Not Acceptable)			<u></u>		- 0.010
			Suite, Apt. #, Etc.		S.				
				City			State Z	ip Code	
10. I, being	appointed the registered agent of the abo	ove named corpo	oration, am f	amiliar with and accept the ol	bligations of Secti	ion 607.0505, F.S.			
Signature o Registered	Agent	ر المالية EGISTERED AG	ENT MUST	SIGN	<del>-</del> -	Date-1122 (	ンチ		
		-GISTERIED AU	2.11 111001						<b>—</b>

11. Leartify that Lam 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

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

1/22/03

305-401 7-RJ

Daytime Phone #

туп инстиноват, пс. 9136-B SW 20th Place Ft. Lauderdale, Florida 33324 Tel: +305-491-7797

e-mail: tmidf@aol.com

## facsimile transmittal

То:	Dept. Of State	Fax:				
Erom:	Tommy Lee	Date:	01/22/02			
Re: 59-3281740		Pages:	1			
CC:		<del>-</del>				
☐ Urgen	t ☐ For Review	☐ Please Comment	☐ Please Reply	☐ Please Recycle		
•	• •	•	• •	•		
Dear Der	nartment of State					

I have received a notice for, Administrative dissolution of my firm. Previously(see enclosed letter copy), I sent and requested an address change and enclosed my renewal check-I am currently checking to find a canceled check from the Depart of State.

I am enclosing this year's renewal check as well. Please check to find my previous correspondence that was sent last year notifying you of the address changes. If you have any questions, then please contact me.

Best regards,

Tommy Lee President TMI International, Inc.

туп инегнацоват, ис. 9136-B SW 20th Place Ft. Lauderdale, Florida 33324

Tel: +305-491-7797 e-mail: tmidf@aol.com

## facsimile transmittal

Tó:	Dept. Of State		Fax							
From:	Tominy Lee		Date:		04/15/01					
Re:	59-3281740		Pages:			Í				
CC:		~	<u>_</u> -	عوشت ۱۹ ست	<u>.</u>	÷		•		
☐ Urger	nt □ For Review		☐ Please Comment			Please Reply	☐ Please Recycle			
•	•	•	•		•	•	•	•		

Dear Department of State,

Pléase change my business address for correspondence and principal place of business to the above captioned address. Also, Enclosed is my check for renewal. If you have any questions, then please contact me.

Best regards,

Tommy Lee

President

TMI International, Inc.