


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 MAR 23 AM 8:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000001920

1. Corporation Name
MICROGRAPHICS BUSINESS PRODUCTS CORPORATION

2. Principal Office Address 13899 BISCAYNE BLVD Suite, Apt. #, etc. 310 City & State N. MIAMI BEACH, FL Zip 33181 Country USA		3. Mailing Office Address 13899 BISCAYNE BLVD Suite, Apt. #, etc. 310 City & State N. MIAMI BEACH, FL Zip 33181 Country USA	
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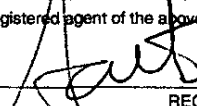
REINSTATEMENT 03-04

4. Date Incorporated or Qualified To Do Business in Florida 01/06/1995		5. FEI Number 65-0542342		Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status					

7. Name and Address of Current Registered Agent

Name ANDRE MARTINS	900030942099
Street Address (P.O. Box Number is Not Acceptable) 4079 PINWOOD LN	03/23/04--01095--014 **150.00
Suite, Apt. #, Etc.	900030942099
	03/23/04--01095--015 **150.00
City WESTON	State FL
	Zip Code 33331

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.

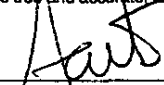
Signature of Registered Agent  Date 03/16/04

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
President	EDUARDO MARTINS	119 HARBOR DR.	KEY BISCAYNE FL 33149
Vice President	ANDRE MARTINS	4079 PINWOOD LN	WESTON FL 33331
Secretary	SILVANA MARTINS	4079 PINWOOD LN	WESTON FL 33331
			900030942099 03/23/04--01095--016 **150.00

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:  Andre Martins Date 3/16/04 Daytime Phone # (954) 336-1768

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CFR2081 (01/04)

Miami, March 12, 2004

In reference to:

Document #: P95000001920

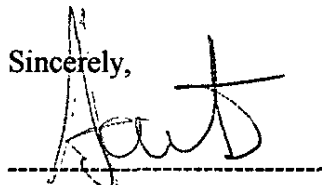
Company Name: Micrographics Business Products Corporation

To Whom It May Concern:

This letter is to serve as explanation as to why Micrographics Business Products Corporation), EIN # 65- 0542342 did not file its 2002 Annual Report. We did not receive the first and neither the second notice as well. Please find enclosed one check in the amount of \$150.00 for our 2002 Annual Report, another one for 2003, and another for 2004 . We sincerely apologize for any inconvenience this delay may cause, and hope you will waive all late charges. Thank you in advance for your consideration. Please also update our address, our current address is:

13899 Biscayne Blvd. suite 310
N. Miami Beach, FL 33181

Sincerely,

A handwritten signature in black ink, appearing to read "Andre Martins", is written over a horizontal dashed line.

Andre Martins