CORPORATIO	N
REINSTATEME	NT



FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

DIVISION OF CORPORATIONS

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DOCUMENT # 195000 (3283.

Y.P.C. Inc.

2. Principal Office Address 200 Old Hook Road		3. Mailing Office Address Same		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		
City & State Harringto	n Park, NJ	City & State	وبالها لورانيال ليبد ولوا البالها	
Zip 07640	Country USA	Zip	Country	

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4.	Date Incorporat To Do Business	/15/1	995	·		
5.	FEI Number	 		Applied	Enr	

59-3391175

6. CERTIFICATE OF STATUS DESIRED

✓

\$8.75 Additional Fee required for a Certificate of Status

Not Applicable

7. Name and Address of Current Regist	ered Agent	
Name The Prentice Hall Corporation System Inc.		1
Street Address (P.O. Box Number is Not Acceptable) 1201 Hayes Street		
Suite, Apt. #, Etc. 105		*:
City Tallahassee	State Zip Coo	

Signature of Registered Agent _ Phf

Elaine Phaneuf, Authorized Rep.

Data 11-11-2004

Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

REGISTERED AGENT MUST SIGN

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D/P	Robert J. Iacullo	200 Old Hook Rd.	Harrington Park, NJ
D	Xavier Boulat	200 Old Hook Rd.	Harrington Park, NJ
D	Robert A. Gerber	200 Old Hook Rd.	Harrington Park, NJ
VP/T	Edward J. Imparato	200 Old Hook Rd.	Harrington Park, NJ
s	Carla E. Hjelm	200 Old Hook Road	Harrington Park, NJ
			100043070531

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

<u>11-4-04</u>

Daytime Phone #

11/2,300

CR2E081 (01/04)