


2005 FOR PROFIT CORPORATION REINSTATEMENT

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DOCUMENT # P95000038949		
1. Entity Name KANEC (USA), INC.		

FILED
05 JUN 20 AM 8:39
TALLAHASSEE, FLORIDA

Principal Place of Business 3399 NW 151 TERR OPA-LOCKA, FL 33054	Mailing Address PO BOX 260307 PEMBROKE PINES, FL 33026
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

05192005 REIN-P CR2E098 (6/04)

4. FEI Number 65-0584379	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
MOGBO, CHUCH P.A. 2331 NO. STATE ROAD 7 STE. 124 LAUDERHILL, FL 33313	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	(NOTE: Registered Agent signature required when reinstating)	DATE
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FILE NOW!!! FEE IS \$900.00	
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P IKEJIANI, EBERE J 2321 DUNHILL AVE MIRAMAR, FL 33025 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP IKEJIANI, AZUBUEZE 2321 DUNHILL AVE MIRAMAR, FL 33025 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D IKEJIANI, AFAM MD 1916 PATTERSON ROAD NASHVILLE, TN <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D IKEJIANI, OLISA MD 17118 HANOVER AVE ALLEN PRIL, MI <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D IKEJIANI, BONNY MD 2003 FULTON RD CANTON, OH <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	6/1/05	954-583-5840
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #

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KANEC {USA}, INC.
PO BOX 260307
PEMBROKE PINES, FL 33026

June 15, 2005

Secretary of State
Division of Corporations
Florida Dept. Of State

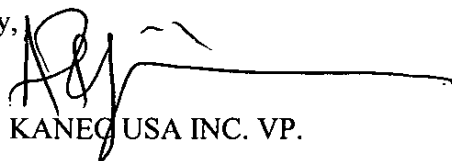
Dear Sir/Madame

APPEAL TO REINSTATE

We hereby indicate that we never received any further information or reply as of when our registration was returned, for need of signature in 2004. This has been verbally discussed with a staff {Cathy and Supervisor Mitchell}. Therefore we never knew we were administratively dissolved or otherwise until we applied for credit to our suppliers.

Please accept the payment of 300.00 dollars as indicated in letter reference #105A00036907 dated May 23, 2005. Thanks for your approval

Your Sincerely,


KANEC USA INC. VP.