PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THE FORM.

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CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	04 MAY 26 AM II: 45 SECRETARY OF STATE TALLAHASSEE, FLORIDA
DOCUMENT # P9600012768 1. Corporation Name Quantum Density, Inc.		
Quantum Dens	sity, Inc.	
	3	REINSTATEMENT 03-04
2. Principal Office Address	3. Mailing Office Address	B CATEFORD & C. S. C.
1705 Cleburne Drive Suite, Apt. #jetc.	Suite, Apt. #, etc.	
01.08.4	City & State	Date Incorporated or Qualified To Do Business in Florida
City & State H. Myers, TC	Ony a state	5. FEI Number Applied For Not Applicable
33919 US	Zip Country	6. CERTIFICATE OF STATUS DESIRED 68.75 Additional Fee required for a Certificate of Status
	7. Name and Address of Current Registe	······································
Name Ronald	D. Gardner	
Street Address (P.O. Box Number is N		
Suite, Apt∄#, Etc.		500034730245 04/30/0401007003 **758 . 75
CITY Ft. Myp	Sim	State Zip Code FL 33919
	ove named corporation, am familiar with and accept the	
Signature of Registered Agent	CO-CO-CO-CO-CO-CO-CO-CO-CO-CO-CO-CO-CO-C	Date 4/27/84
9. Names and Street Addresses of Each Officer an	nd/or Director (Florida nonprofit corporations must list at l	east 3 directors)
Titles Name of Officers and/or Directors	Street Address of Eac Officer and/or Director	
P Ronald D. Gar	dner 1205 Cleburne	Drive A. Myers, FZ 33919
5 Allison S. Gara	lner 1205 Cleburne	Drive H. Myers, TC 33919
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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: President President		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #		

QUANTUM DENSITY, INC. 1205 CLEBURNE DRIVE FORT MYERS, FL 33919 (239)275-9369

May 14, 2004

Florida Dept. of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Attn: Mr. Tyrone Scott

Re:

Quantum Density, Inc.

Ref. #: P96000012768

Dear Mr. Scott:

Enclosed please find the following:

- 1. Letter from Dept. of State dated May 4, 2004;
- 2. 2004 Corporation Reinstatement form.

Pursuant to our phone conversation earlier this week, please be advised that Quantum Density, Inc. did not receive any notices from the Division of Corporations in 2003 for filing the annual report. At this time, I am requesting the reinstatement fee be waived and the balance of \$758.75, less the filing fees and certificate of status, be returned to Quantum Density. This money was previously forwarded to you.

Thank you for your attention to this matter.

Sincerely,

Allison S. Gardner

/as enclosure