

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT
 LOUISIANA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS



FILED

97 NOV 14 PM 1:35

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P96000020286

1. Corporation Name
 IS ASSIST INC.

Principal Place of Business Mailing Address
 8649 HIMES STREET STE 1411 8649 HIMES STREET STE 1411
 TAMPA FL 33614 TAMPA FL 33614



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 214 Hyde Park Pl Suite, Apt. #, etc. #6 City & State Tampa, FL Zip 33606 Country U.S.	3. New Mailing Office Address, If Applicable PO BOX 4407 Suite, Apt. #, etc. City & State Tampa, FL Zip 33677-4407 Country U.S.	4. Date Incorporated or Qualified To Do Business in Florida 03/04/1996	5. FEI Number 59-3361932 Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status			

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

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	Paul Buckley	214 Hyde Park Pl #6	Tampa, FL 33606

200002350322-8
 -11/18/97-01038-008
 ****165.00 ****165.00



8. Name and Address of Current Registered Agent BOLLIER, JAMES H SR. 40347 US-10 NORTH STE 138 TARPON SPRINGS FL 34689	9. Name and Address of New Registered Agent Name Paul Buckley Street Address (P.O. Box Number is Not Acceptable) 214 Hyde Park Pl Suite, Apt. #, Etc. #6 City Tampa State FL Zip Code 33606
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10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: *Paul Buckley* Date: 11/12/97
 REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No

(See other side for Information on intangible tax.)

12. 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: *Paul Buckley* Paul Buckley 11/12/97 813-417-1676
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CPRE040 (8/97)

November 10, 1997

Department of State
Division of Corporation
Annual Report/Reinstatement Section
PO Box 6327
Tallahassee, FL 32314-6327

Dear Head of Division of Corporation:

I was instructed to write and explain why my annual report is delayed. I was actually unaware of the fact that this had to be filed. I have moved so I never received notice, this is the first year I was required to file since I just became incorporated last year.

I would appreciate you considering my situation, and request that you please forgive my naiveté and reinstatement fee. I can assure you that this will be filed in a timely manner in the future.

If you have any questions or need additional information, please do not hesitate to call me at 813-417-1676.

Respectfully,

I.S. Assist, Inc



Paul Buckley
President/Owner