APPLICATION FOR	ALL INSTRUCTIONS ORIDODE FROM AN AB B. Mo Seletar of	NT OF STATE	7			
REINSTATEMENT OF CORPORATIONS			FILED			
DOCUMENT #(IUI) DOCO32907			98 NOV -2 AM 8: 26			
			SECRETARY OF STATE TALLAHASSEE. FLORIDA			
HIGH NOON INVESTMENT INCORP			TALLAHASSEE. FLORIDA			
Principal Place of Business 4201 N. OCEAN	Mailing Address	Salc.				
BOCA RATON , FL	3343/					
If above addresses are incorrect in any way, line thro		correction below.				
New Principal Office Address, It Applicable	New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 4/-15-96			
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State		5. FEI Number		Applied For	
Zip Country	Zip Count		65 - 0664747 Not Applicable 6. Specificant of Station			
7. Names and Street Addresses of Each Officer and/				OF STATUS DESIRED	or a Certificate of Status	
Title(s) Name of Officers Street Address of Each Officer and/or Director City / State / Zip 1 2 3 (Do NOT Use Post Office Box Numbers) 4						
OWNER JAMES JAIME PUERTO 4501 N. OCEANBL				BOCA RATOR	V, FL 3343/	
PRES JORGE P. VANHECK 4201 N. OCEAN			BLUD	BOCA RATO	1W)FL 33431	
APT 501C			RAUD	BOCA RATE	2W. El 33431	
V.P. MARIA ELGENIA 4201 N. OC. ROJAS APT 501 C					3775	
			4			
			1 0002686471 5 -11/04/9801076001 ****315.00 ****377.00			
		., 				
8. Name and Address of Current Registered Agent Name			9. Name and Address of New Registered Agent			
JORGE P. VANHECK Stre						
H201 N. OCEAN BLVD. APTSW. Street Address (P.O. BOCA RATON, FL 33431 City						
BOCK KOLON 14 22421			State Zip Code			
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 Sold Agent Agent MUST SIGN Date 8/30/98						
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No 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 filling 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: SORGE T. UA	U 14ECK TED NAME OF SIGNING OFFICER OF I	DIRECTOR	8	130/98 5	61 347 6633 time Phone #	



October 30, 1998

Florida Department of State Division of Corporations Tallahassee, Fl

Dear Gentlemen;

According to our phone conversation I am herewith sending you the application for reinstatement for my corporation, Highnoon Investments Inc. I also enclose a money order for \$ 315.00 for the two year payment.

As discussed over the phone, I was out of the country for three years and when I got back I found that the person in charge had never done anything. This person had to be fired. I am now doing what is necessary to get my corporation up to date.

Thanking you in advance for kind attention to this matter.

I remain truly yours.

Jorge P. Van Heck.