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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

 <b>CORPORATION</b>		<b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS		<b>FILED</b>  03 MAY -7 AM 11:27  SECRETARY OF STATE TALLAHASSEE, FLORIDA	
<b>DOCUMENT # P97000027347</b>					
<b>1. Corporation Name</b> PAULA GREENBERG INTERIORS, INC.					
<b>2. Principal Office Address</b> 6700 E Rogers Circle <small>Suite, Apt. #, etc.</small>		<b>3. Mailing Office Address</b> 6700 E Rogers Circle <small>Suite, Apt. #, etc.</small>		<b>4. Date Incorporated or Qualified To Do Business in Florida</b> 03/25/1997	
City & State: Boca Raton, FL		City & State: Boca Raton, FL		<b>5. FEI Number</b> 65-0772060 <small>Applied For Not Applicable</small>	
Zip 33487	Country Palm Beach	Zip 33487	Country Palm Beach	<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
<b>7. Name and Address of Current Registered Agent</b>					
Name: Owens, Paula G.					
Street Address (P.O. Box Number is Not Acceptable): 6700 E Rogers Circle					
Suite, Apt. #, Etc.:					
City: Boca Raton,					
				State: FL	Zip Code: 33487
<b>8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.</b>					
Signature of Registered Agent: <i>Paula Greenberg Owens</i>				Date: 04/30/03	
REGISTERED AGENT MUST SIGN					
<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b>					
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
DPST	Greenberg, Paula	7180 Mallorca Crescent		Boca Raton, FL 33433	
V	Salemi, Nancy	3975 NW 25th Way		Boca Raton, FL 33434	
V	Rice, L. Suzanne	932 Greensward Lane		Delray Bch., FL 33445	
01-03 TS					
<b>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.</b>					
<b>SIGNATURE:</b> <i>Paula Greenberg Owens</i> Paula Greenberg 04/30/03 (561) 988-7552					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2001 (10/02)

.....Paula Greenberg Interiors, Inc..... *PPH 07/02*

April 30, 2003

Florida Department of State  
Divisions of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To Whom it may Concern,

As per my telephone conversation with the office of reinstatement on April 29, 2003 and per their instructions, this letter is a request to reinstate Paula Greenberg Interiors, Inc. and to waive the reinstatement fee.

August 2000 the company moved from 3290 NE 33rd Street in Fort Lauderdale to 6700 East Rogers Circle in Boca Raton, and our Corporation Annual Report was never received.

Enclosed please find the Corporation Reinstatement form and a check for the annual fees.

Thank you for help in this matter.

Sincerely,

*Paula Greenberg*  
Paula Greenberg

Lic.# IB 0001322

6700 E. Rogers Circle.....Boca Raton, Florida 33487

Phone: 561-988-7552.....Fax: 561-988-7501