


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM
FILED

04 MAR 29 PM 3:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000101948

1. Corporation Name
MIDWEST GEAR AND DIESEL CO

REINSTATEMENT 03-04

800031550018
03/31/04--01019--016 **900.00

2. Principal Office Address <u>2307 DOUGLAS RD</u> Suite, Apt. #, etc. <u>400</u> City & State <u>MIAMI FLA</u> Zip <u>33145</u> Country <u>USA</u>		3. Mailing Office Address <u>2307 DOUGLAS RD</u> Suite, Apt. #, etc. <u>400</u> City & State <u>MIAMI FLA</u> Zip <u>33145</u> Country <u>USA</u>	
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4. Date Incorporated or Qualified To Do Business in Florida 12/03/97

5. FEI Number 65-0802863 Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name IDA C OVIES

Street Address (P.O. Box Number is Not Acceptable) 2307 DOUGLAS RD

Suite, Apt. #, Etc. 400

City MIAMI State FL Zip Code 33145

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.

Signature of Registered Agent Ida C Ovies Date 3/24/04

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
<u>P/D</u>	<u>DE MENDONCA, CLOVIS</u>	<u>2404 HOLLYWOOD BLVD</u>	<u>HOLLYWOOD FL 33120</u>
<u>S/T</u>	<u>MENDONCA, MARGARET</u>	<u>2404 HOLLYWOOD BLVD</u>	<u>HOLLYWOOD FL 33120</u>

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] Date P Daytime Phone # 305 447 8801

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (01/04)

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