
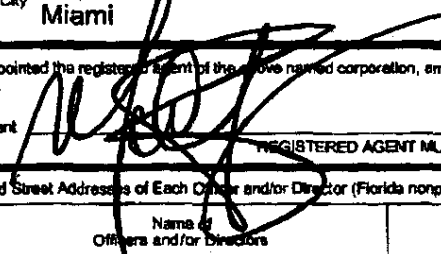
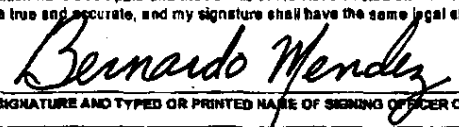


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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 03 AUG - 1 PM 1:33

<b>CORPORATION</b> <b>REINSTATEMENT</b>				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P98000087256					
1. Corporation Name THE WINDOW FASHION STORE, INC.					
2. Principal Office Address 6850 N.W. 4th Street			3. Mailing Office Address 2665 S. Bayshore Drive		
Suite, Apt. #, etc.			Suite, Apt. #, etc. Suite 703		
City & State Miami, Florida			City & State Miami, Florida		
Zip 33166	Country USA	Zip 33133	Country USA	4. Date Incorporated or Qualified To Do Business in Florida 10/9/1998	
				5. FEI Number 65-0873003	Applied For Not Applicable
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$6.75 Add total fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name World Corporate Services, Inc.					
Street Address (P.O. Box Number is Not Acceptable) 2665 S. Bayshore Drive					
Suite, Apt. #, Etc. Suite 703					
City Miami			State FL	Zip Code 33133	
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 			Date 7/30/03		
REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
C	BERNARDO MENDEZ	2665 S. Bayshore Drive, Suite 703		Miami, Florida 33133	
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)(b), 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: 		7/30/03		(305) 858-9900	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

2002-2003  
JBR  
\$300.00

300022294223  
08/14/03--01002--005 \*\*750.00

CR2003 (10/02)

## RICHARDS & POLANSKY

A PROFESSIONAL ASSOCIATION  
ATTORNEYS AT LAW  
GRAND BAY PLAZA  
2665 SOUTH BAYSHORE DRIVE  
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MIAMI, FLORIDA 33133  
TELEPHONE: 305-858-9900  
TELECOPIER: 305-285-0015  
E-MAIL: rpalaw@gate.net  
<http://www.richards-law.com>

July 31, 2003

Florida Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

Attn: Reinstatement Division

**Re: The Window Fashion Store, Inc., a Florida corp. (the "Company")**

Dear Sir or Madam:

As our office advised your department, the Company moved their offices in 2002; thus they never received the Annual Report for the 2002 calendar year. We respectfully request that the Company be reinstated and that the reinstatement penalty fee be waived.

In accordance with the instructions received, enclosed herewith please find the following in order to reinstate the Company with the Florida Secretary of State:

1. State of Florida Application For Reinstatement; and
2. Check payable to the Secretary of State in the amount of \$300.00 to cover the Filing Fee of \$150.00 for the 2002 and 2003 calendar year.

Your assistance in this matter is greatly appreciated.

Sincerely,

  
Mitchell S. Polansky

MSP/el

Encl.