PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATI	ENT	Secretary DIVISION OF C W0800000		2008 FEB - 5 AM 8: 07 SECRETARY OF STATE TALLAHASSEE. FLORIDA	
DOCUMENT # P98 0000 95814				TALLAHASSEE. PLOMON	
Magna's International				REINSTATEMENT 07-08	
2. Principal Office Address - No P.O. Box #		3. Mailing Office Address		REINSTATEMENT 0 /-0 8	
1321 Daytonia Rd		Same		CR2E081 (12/07)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida 11/13/98	
City & State		City & State		5. FEI Number Applied For.	
Miami, FL				65-0875586 Not Applicable	
Zip 33141	Country USA	Zip	Country	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name Lhana Nelson Street Address (P.O. Box Number is Not Acceptable) 1321 Daytonia Rd				The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.	
Suite, Apt. #, Etc.					
City State Zip Code Miami, FL 33141					
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 1/0/8					
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	r City / State / Zip		
what K				700115195877 01/15/0801034008 **300.00	
PROMITE LHANA NELSON 1321 DAYTONIK			RD MAMI BOIL, FL		
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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 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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #					

To: Whom it

Whom it may concern

Division of Corporation

Corporation Reinstatement Department

From: Lhana Nelson

Magna's International Document #P98000095814

FEI# 65-0875586

Date: 01/10/08

-Dear Mr/s:-

I haven't been working on my company for personal reasons for the last few years. But since I haven't decided to close it, I still file all the taxes and other documents required.

Since I was spending most of last year overseas for health problems, I filed my annual report for 2007 at end of January beginning of February.

Now that I am back to file the 1120's, I was going thru my bank statements to find out that the \$150.00 check was never cashed/deposited. I went online to check the status of my corporation to find it inactive.

As I was instructed over the phone, I am sending you this letter, the form and the check with the payment of \$150.00 for 2007 and \$150.00 for 2008 since I can't pay over the phone. I will be checking online to make sure you have received it. I will contact you within 02 weeks if I don't see any change.

Please do not hesitate in contacting me if you have any question or need any assistance at 786 344 5150.

I thank you in advance and apologize for any inconvenient,

Lhana Nelson

Replacing check (200x)
Lost check (200x)