

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 JAN 22 PM 3:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

REINSTATEMENT 03-04

DOCUMENT # P99000030934

1. Corporation Name

Three Squared, Inc.

2. Principal Office Address

444 Brickell Avenue

Suite, Apt. #, etc.

Suite 51-742

City & State

Miami, FL

Zip

33131

Country

USA

3. Mailing Office Address

444 Brickell Avenue

Suite, Apt. #, etc.

Suite 51-742

City & State

Miami, FL

Zip

33131

Country

USA

200027404292
01/22/04--01023--014 **300.00

4. Date Incorporated or Qualified
To Do Business in Florida

04/05/99

5. FEI Number

05-0908646

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

Krys, Claudia

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

444 Brickell Avenue

Suite, Apt. #, Etc.

Suite 51-742

City

Miami

State

FL

Zip Code

33131

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 01-15-2004

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
PD	Krys, Alex	444 Brickell Ave suite 51-742	Miami, FL 33131
SD	Krys, Claudia	444 Brickell Ave Suite 51-742	Miami, FL 33131

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] Claudia Krys

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-15-2004 3058127838

Date

Daytime Phone #

CR2E081 (10/02)

2004 Uniform Business Report (UBR)

Document #: P99000030934

Entity Name: THREE SQUARED, INC.

Principal Place of Business: 444 Brickell Avenue
Suite 51-742
Miami, FL 33131

Mailing Address: 444 Brickell Avenue
Suite 51-742
Miami, FL 33131

FEI Number: 65-0908646

Name/Addr Reg Agent: Krys, Claudia
3411 Granada Blvd.
Coral Gables, FL 33134

Name/Add NEW Reg Agent: Krys, Claudia
444 Brickell Avenue
Suite 51-742
Miami, FL 33131

Officers & Directors: Title- President
Krys, Alex
444 Brickell Avenue
Suite 51-742
Miami, FL 33131
Title- Officer
Krys, Claudia
444 Brickell Avenue
Suite 51-742
Miami, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the exemption state in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears as an officer or director above.

Signature:



01/15/2004

Printed Name: Claudia Krys, Officer

Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314
January 15, 2004

Ref: Three Squared, Inc (Doc P99000030934)
Annual Reports 2003-2004

Florida Department of State, Division of Corporations:

I am writing to ask that the Annual Reports for 2003 and 2004 be filed with the accompanying Profit/Non-Profit Re-instate form and enclosed check. I was advised by a representative at your office (phone 850-245-6056, selection 4) that I could write this letter explaining my circumstances and include the form and a \$300.00 check to become re-instated and file the 2004 Annual Report, too.

The circumstances of our in-active status are due to a change in address. The mail sent to Three Squared, Inc. by your department was mailed to an outdated PO Box (330686, Miami, FL 33133) and therefore all of the notices were returned to you by the post office. I did not receive one document advising me that the UBR form, which I submitted via US Mail in January of 2003, was not received by your office.

I'm sorry for the confusion and I hope that you will accept the enclosed form and check and re-instate our corporation and file our 2004 Uniform Annual Business Report as well.

Thank you in advance for your consideration with my situation.

Sincerely,



Claudia Kryz
Officer, Three Squared, Inc.
444 Brickell Ave, Suite 51-742
Miami, FL 33131
305-812-7838