P 183

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	Secre	ARTMENT OF STAT etary of State of Corporations		05 FIL	ED AM 11: 13
DOCUMENT # Page SC 1. Corporation Name GREAT FORTHERN	004279 Burines	55 MXHUSES INC.		TALLAHASSEE, FL	AM II: 13 ORIDA OS
∞ •			f ffcare a		
2. Principal Office Address 7/90 3W 1457.		ddress Sw Holav	e	ি নিগদিনামু ছ CR2E081 (৪	IAST 0 4 2669
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4.00	4. Date Incom	porated or Qualified	
City & State	City & State				95-11-99
Pemplake Plast	2 1 1 A 17	in FL.	5. FEI Number	934876	Applied For Not Applicable
Zip Country 73023-708 US A	zip フラ185	Country USA	6.	E OF STATUS DESIRED	S8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent					
Name Ava Telgapico					
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 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 Directo	irs	Street Address of Each Officer and/or Director		City / State / Zip	
P Luis Deigaoice	19	147275W 46 CAN		MIANI, FC. 75405	
D5 Ava Delgal	14	1727 Sw	46 Cax	Mari, 1	FC. 37/85
					:
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 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: SIGNATURE AND TYPED OR PRINTED NAME OF ARCHING OFFICER OR DIRECTOR. Date Description of 17, 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 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.					



June 22, 2005

Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Ref. Document # P99000042706

Gentlemen:

Attached to the present please find check # 1231 in the amount of \$ 150.00 for the Annual Report for this year which we sent you on April 22, 2004, replacing check # 1208 which was sent to you on April 22, 2005.

We noticed that although we sent the money before the deadline, the check is still outstanding. Since we did not receive any further notifications from your department, we request that the additional fees of \$400.00 be waived.

With no further matters for the moment, we remain.

Sincerely Yours,

Ana Delgadillo Secretary

Ph: 1-850-245-6056#4



September 29, 2005

DIVISION OF CORPORATIONS P.O. Box 6327 Tallahassee, Florida 32314

Ref: Document # P99000042706

Dear Sirs:

This is the third time, attached to the present please find check # 1261 in the amount of \$ 150.00 for the Annual Report for this year which we sent you on April 22, 204 the first time and the second on June 22, 2005.

We noticed that although we sent the money before the deadline, the checks are still outstanding. Since we did not receive any further notifications from your department, we request that the additional fees of \$400.00 be waived.

With no further matters for the moment, thanks in advance for your attention.

Sincerely yours

GREAT SOUTHERN BUSINESS MACHINES

gadelle

Secretary