

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 FEB 16 PM 2:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-04

100028782871
02/16/04--01019--003 **\$300.00

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # PA9 0000 55565

1. Corporation Name
REEL PROTECTION INC

2. Principal Office Address
1909 NE 168 ST

3. Mailing Office Address
SAME AS PRINCIPAL ADDRESS

Suite, Apt. #, etc.

City & State
N MIAMI BCH

Zip Country
33162 MIAMI-DADE

4. Date Incorporated or Qualified
To Do Business in Florida **JUNE 17, 1999**

5. FEI Number
65-0948536

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
Kenneth C Lasseter, III

Street Address (P.O. Box Number is Not Acceptable)
1909 NE 168 ST

Suite, Apt. #, Etc.

City State Zip Code
N MIAMI BCH FL 33162

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 **FEBRUARY 05, 2004**

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
PD	Kenneth C Lasseter, III	1909 NE 168 ST	N MIAMI BCH, FL 33162

10. I certify that I am an officer or director of 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: KENNETH C LASSETER III FEBRUARY 305-948-8885

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (01/04)

REEL PROTECTION INC.

"Professional Protection"
1909 Northeast 168th Street
North Miami Beach, Florida 33162
Email: info@reelprotection.com

305.948.8885

Fax: 305-948-8330

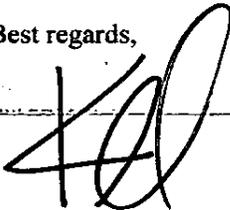
February 5, 2004

Re: Annual Reporting
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

~~Dear Division of Corporations,~~

During the course of a busy weekday it was brought to my attention by a co-worker the status of the above corporation was ADMIN DISSOLUTION FOR ANNUAL REPORT. I have had corporations for the past fifteen (15) years and I have never really paid to close of attention to this because I have always received the annual report from the State of Florida and updated it and returned it with the applicable fee. For some reason or another be it new policy by the State of Florida that I'm unaware of or mail the annual report never crossed my desk. Putting this into consideration I like to make a request that if possible can you please waive the late fee?

Best regards,



Kenneth C. Lasseter, III