PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

P99000090270

1. Corporation Name

TWI - NORTH, INC.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



2. Principal Office Address 17200 Tamiami Trail		3. Mailing Office Address			
		PO Box 4	1357	-2000-2002 UBF	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			ZUUI
				Date Incorporated or Qualified To Do Business in Florida	<u></u>
City & State Punta Gorda, FL		City & State N Fort Myers, FL		10-4-99	
				5. FEI Number	Applied For
				65-0961614	Not Applicable
Zip	Country	Zip	Countrÿ	6.	5 Additional Fee required
33955	USA	33918	USA		or a Certificate of Status
					1

		utanne and voditees of oditalit Defisition vitalit						
	Name							
	Duncan, Gordon R.							
	Street Address (P.O. Box Number is Not Acceptable)							
	1601 Jackson Street							
	Suite, Apt. #, Etc. 400005977954- Suite 101 -06/25/02010621							
	Suite 101 -06/25/0201062115							
	City State **海峽與自,即 *****310.(FORT MYers:							
	Fort Myers;							
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 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					
PSD	Robert E. Stintzi	17200 Tamiami Tv.	Punta Gorda, H 33955					
UPD	Sherri Salters	17200 Tamiami Tv.	Punta Gorda, Fl 33955					
			300.00-ARON14					
			03/14/00 90068 030					
			\$150.00					
40 Loodifu	that I am an officer or director or the receiver or tracks		`					

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.

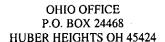
SIGNATURE:

OR PRIMED NAME OF SIGNING OFFICER OR DIRECTOR

26.02 239-731-1900

MAIN-OFFICE P.O. BOX 4357 NAEL MYERS FI 33918 LIC# 9000010







April 24, 2002

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

Ref Reinstatement,

To whom it may concern.

Today I talked to Eula Peterson in your office as I had discovered quite by accident that TWI North Inc one of my other Corporations was inactive. When I inquired about this Eula advised they had back in 2000 sent our Annual report Back requesting our Federal Id Number. I recalled the incident. She however said your department never received our response. Our Federal ID # is for TWI North Inc is 65-0961614. We were unaware you never received this.

We are enclosing a check for \$300.00 to cover the annual reports for 2001 and 2002, as we never received them because of this incident. We request you waive any penalties and reactivate this corporation. Also, the information on the mailing address was given incorrectly by Gordon Duncan our Attorney. The correct mailing address is P.O. Box 4357 N Ft Myers Fl 33918 the Physical Location is 17200 Tamiami Trail Punta Gorda Fl 33955

Robert E Stintzi

President TWI North Inc

Cc/ Gordon Duncan