PLEASE READ	ALL INSTRUCTION	ONS BEFORE C	OMPLET	ING THIS	FØRM.			
FOR 95 11 REINSTATEMENT	TMENT OF STATE . Mortham y of State corporations	97 OCT 15 PM 2: 33						
DOCUMENT # s03696								
1. Corporation Name			SECRETARY OF STATE TALLAHASSEE, FLORIDA					
Enviroscope, Inc.				, (2,000				
Principal Place of Business Mailing Address			1					
12767 SW 256 Terrace 12767 SW 256 Terrace Miami, Florida 33032 Miami, Florida 33032								
If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable								
Sulte, Apt. #, etc.			To Do Busir	corporated or Qualified susiness in Florida 10/3/90				
City & State	City & State			5. FEI Number 65-0221248				
Zip Country	Zip	Country	6. S8.75 Ad			Not Applicable		
7. Names and Street Addresses of Each Officer and/o	or Director (Florida nonprofit	corporations must list at lea	<u> </u>		for a Co	ertificate of Status		
Title(s) Name of Officers Title(s) and/or Directors Street Address of Each Officer and/or Director					City / State / Zi	p		
		12767 SW 256 Terrace		Miami,	Florida	33032		
D Israel Marmol 12		SW 256 Terr	56 Terrace Miami, F		Florida	33032		
D Orlando Comas 12		SW 256 Terr	Terrace Miami, Florida 33032			33032		
				, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	32099	11		
					05-11-7			
	RE	REINSTATEM			tou,	1 0		
6. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent						197 -		
			o E. Manguart					
999 Ponce de Leon Blvo Suite 1150	,	Julio E. Manguart Street Address (P.O. Box Number is Not Acceptable) 1428 Brickell Avenue, Main Floor Suite Apt # Etc.						
Coral Gables, FL 33134 Suite, Apt. #, Etc.								
City Miami					State Zip S	3131		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent Date 10/14/97 REGISTERED AGENT MUST SIGN								
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No kx (See other side for information on intangible tax.)								
12. 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 reinstalement 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: Orlando Comas, Director 10/14/97 (305) 264-3841 SIGNATURE: Date Date Daytime Phone #								



ACCOUNT NO. : 072100000032

REFERENCE :

565418

169526A

AUTHORIZATION

COST LIMIT

ORDER DATE: October 15, 1997

ORDER TIME : 11:11 AM

ORDER NO. : 565418-005

CUSTOMER NO:

169526A

CUSTOMER:

Ms. Amy Concepcion

Manguart & Gomez, P.a.

Main Floor

1428 Brickell Avenue

Miami, FL 33131

DOMESTIC FILINGS

NAME:

ENVIROSCOPE, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Christopher Smith

EXAMINER'S INITIALS