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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM FILED

02 MAR 14 AM 10:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION**  
**REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT #** F96000005745  
**1. Corporation Name**  
 INTER-CON UPSP SERVICES CORPORATION

<b>2. Principal Office Address</b> 210 S. DeLacey Ave. Suite, Apt. #, etc.		<b>3. Mailing Office Address</b> 210 S. DeLacey Ave. Suite, Apt. #, etc.	
City & State Pasadena CA		City & State Pasadena CA	
Zip 91105	Country USA	Zip 91105	Country USA

**1999-2002 UBR**

**4. Date Incorporated or Qualified To Do Business in Florida** 11-05-96

**5. FEI Number** 95-4373367  
 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: Paracorp Incorporated

Street Address (P.O. Box Number is Not Acceptable): 236 East 6th Avenue

Suite, Apt. #, Etc.:

City: Tallahassee

State: FL Zip Code: 32303

10000519581-3  
 -04/05/02--01060-018  
 \*\*\*\*\*600.00 \*\*\*\*\*600.00

**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]* Secretary  
 Date: 03-11-02  
 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
DP	Roland Hernandez	210 S. DeLacey Ave	Pasadena CA 91105
ST	Enrique Hernandez, Jr.	210 S. DeLacey Ave.	Pasadena CA 91105

*101.25 - AK*  
*10.00 - ARKETS*  
*88.75 - ARSUPP*  
*400.00 - CTRA*

**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]* Enrique Hernandez, Jr.  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: March 8, 2002  
 Daytime Phone #: 626-535-2000

CR2E081 (9/01)



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March 8, 2002

INTER-CON

VIA HAND DELIVERY

Florida Department of State  
Division of Corporations  
409 East Gaines St.  
Tallahassee, FL 32399

210 Fourth De Lacey Avenue  
Pasadena, California  
91105

**SUBJECT: Inter-Con UPSP Services Corporation**

To whom it may concern:

Our filing service, Paracorp Incorporated is submitting for filing the following documents executed on behalf of the above-referenced entity:

- 1. Corporation Reinstatement Application; and
- ~~2. Uniform Business Report~~ **Not needed**

Given that we never received an annual report for the year 1999 and all years subsequent thereto, we request that our Reinstatement Fee not exceed \$600.00 and that any supplementary reinstatement fees be waived.

If you have any questions, do not hesitate to contact the undersigned.

Sincerely,

Nancy Di Fabio

Enclosures

Phone: 626 / 535 2200  
FAX: 626 / 683 9111

- U.S.A. • Africa
- Asia • Caribbean
- Latin America