

2002-05 Rev.

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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08/09/05--01028--010 **608.75

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 047000048740

1. Corporation Name
Innovision International Corp.

2. Principal Office Address 9119 - 16 Merrill Road		3. Mailing Office Address Suite 1903B West Tower, PSE Center	
Suite, Apt. #, etc. Suite 110		Suite, Apt. #, etc. Exchange Road, Ortigan Center	
City & State Jacksonville, Florida		City & State Pasig City, Metro Manila	
Zip 32225	Country USA	Zip	Country Philippines

4. Date Incorporated or Qualified To Do Business in Florida June 3, 1997

5. FEI Number 650941051	Applied For Not Applicable
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6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
CT Corporation System

Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road

Suite, Apt. #, Etc.

City
Plantation

State
FL

Zip Code
33324

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 Maria Ozaeta **REGISTERED AGENT MUST SIGN** Maria Ozaeta **Vice President** Date 8-1-05

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
Pres/Di	Justin Isenschmid	Suite 1903B West Tower, PSE Cente	Pasig City, Metro Manila, Philippines

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: Justin Isenschmid
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date _____ Daytime Phone # _____

zeff

July 28, 2005

Department of State
Division of Corporation
P. O. Box 6327
Tallahassee, FL 32314

RE: Reinstatement of Innovision International Corp.

To Whom It May Concern:

I, Justin Isenschmid, was on October 4, 2002, and have since been, the President of Innovision International Corp. (the "Corporation") when the Corporation was administratively dissolved for failure to file its Annual Report.

In connection with the Administration Dissolution of the Corporation, neither the Corporation nor I received the 2002 Annual Report from the Secretary of State of Florida. As my mailing address, the Corporation's mailing address, and the Corporation's registered agent in Florida have all remained the same since prior to 2002, I am unaware of how or why neither myself nor the Corporation has received any notice from the Division of Corporations regarding our delinquent annual reports.

As a result of my lack of receipt of notice of the annual report, I request a one-time waiver on the reinstatement filing fee of \$300.00.

Yours truly,

J. Isenschmid

Justin Isenschmid
President