PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Secretary of State

DIVISION OF CORPORATIONS

06 JUN - 1 PM 4: 12

SECRETARY OF STATE TALLS HISSEE, FLOE D.

DOCUMENT # NØ1ØØØØ\$5 66Ø
1. Corporation Name AFRICAN WORLD ARTISTS
COLLECTIVE, INC.

COLLECTIVE, INC.							
	`						
			.i. ≥	<u> </u>			
2. Principal	Office Address	3. Mailing Office Addres	Office Address		ATEMENT CREEKS (120		
1001 SW 39 AVENUE 11		1001 SW 3	1001 SW 39 AVENUE		CRZE081 (12/0	04-06 NSC	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
		j			orated or Qualified	11 ladde	
City & State		City & State		5 551 N	<i>y 47 y</i>	Applied For	
FORT LAUDERDALE, FLORID		A FORT LAUDERDALE, FLORIDA		223850656 Not Applicable			
Zip 3331	Country ¹	2ip 33312	Country	R	OF STATUS DESIDED \$8.	75 Additional Fee required or a Certificate of Status	
		7. Name and 4	Address of Current Registe	red Agent	7 4		
	Name 1						
	MATTHEW K THOMAS WOOD						
ł	Street Address (P.O. Nox Number is Not Acceptable) 06/14/06						
ì	100(5W 3" A Suite, Apt. #, Etc.	VENUE					
4							
FORT LAUDERDALE - State Zip Code 33312							
8. I, being a	appointed the registered agent of the abo	ve named perporation, am f	amiliar with and accept the	obligations of section	on 607.0505 or 617.0503, F.S	s.	
Signature of		W			-/-/		
Registered A		GISTERED AGENT MUST	SIGN		Date <u>5/30/</u>	2006	
9 .:	15 100						
9. Names	and Street Addresses of Each Officer and	d/or Director (Florida nonpro	· · · · · · · · · · · · · · · · · · ·				
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / Sta	ite / Zip	
PD	0.7		1001 SW 39 AVE.		FT. LAUD. FL	333/2_	
10	ANTHONY R. THOMPSON		FT. LAUD, FL 33312				
VD,	JOHNSON ODIBI		3273 NW 181 ST STREET		CAROL CITY, FL	33\$56	
SD	NZINGAH ONIWOSAN		12277 COLONY PRESERVE DA		BOYTON BEACH	H, FL 33436	
TD	TASHRMA HARNETT		9170 NW 19th PLACE		SUNRISE, FL	•	
			18				
this rein owed by	that I am an officer or director or the rece statement application, the reason for diss y the corporation have been paid and the application is true and accurate, and my s	otution has been eliminated names of individuals listed o	l, the corporate name satisfie on this form do not qualify fo	es the requirements r an exemption con	of section 607.0401 or 617.0	401, F.S., that all fees	
OII (IIIS E	approaction is true and amountate, and my s	2 -/		IV. Vall.	11	,	
			ANTHONY R.				