APPLICATION

FLORIDA DEPARTMENT C. STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

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P94000011298

1. Corporation Name

TEKKA, INC.

Principal Place of Business

2426 SUNRISE DR.

Mailing Address

2426 SUNRISE DR.

FILED 00 DEC 18 PM 4: 14

SECRETARY OF STATE TALLAHASSEE, FLORIDA

SEBRING FL 33872 US			sebring fl US	. 33872					
If above a	ddresses are in	ncorrect in any way, line t	hrough incorrect i	nformation and enter	correction below.				
2. New Pri	. New Principal Office Address, If Applicable 3. New			ng Office Address, If	Applicable	Date Incorporated or Qualified To Do Business in Florida 02/07/1994			
Suite, Apt.	≠, etc.		Suite, Apt. #	etc.		5. FEI Number Applied For			
City & State	9		City & State			65-0473605		Not Applicable	
Zip		Country	Zip:	Count	γ	CERTIFICATE	5 Additional Fee required or a Certificate of Status		
7. Names	and Street Add	resses of Each Officer an	d/or Director (Flo	orida nonprofit corpor	ations must list at le	east 3 directors)		·	
Title(s)				Street Address of Each Officer and/or Director 3			City / State / Zip		
D	ONO, TATSUO			2426 SUNRISE	DR.		SEBRING FL		
D	DE ONO, ADELA			2426 SUNRISE DR.			SEBRING FL		
						50	0003516 -12/29/000 ****150.00	4255 1004003 ****150.00	
							OBUEZ:	18	
•	8. Nam	e and Address of Curre	nt Registered Ag		Name and Address of New Registered Agent				
108 A	RIGUEZ, ENR APPLETREE / NING FL 3385	AVE.	annye named con	poration am familiar	Suite, Apt. #, E	SUNRI	State	e Zip Code 3,3.872,	
Signature Registered	.	are exp		GENT MUST SIGN	The second of the		Date 12-1	5-00	

11.3 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.

D OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



> Accounting Professionals Group, Inc.



6220 S. ORANGE BLOSSOM TRAIL, SUITE 142 ORLANDO, FL 32809 (407) 856-1906

October 19, 2000

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

Re: Tekka Inc.

2426 Sunrise Drive Sebring, Florida 33872

FEIN: 65-0473605

Document #: P94000011298

Dear Sir/Madam:

Our client, Tekka Inc., is in receipt of your Certificate of Administrative Dissolution.

They inform us that they had previously mailed you check # 2777 on April 29, 2000 in the amount of \$150.00 along with their original Corporation Renewal Application. They later receive a 2nd notice from you for renewal of their corporation. The store manager at that time telephoned your office and was instructed to send a letter stating what had happened along with a second check in the amount of \$ 150.00, in good faith the store manager sent this letter along with check # 1294 on July 24, 2000 in the amount of \$ 150.00, we have attached a copy of this letter along with copies of the check stubs for these 2 checks for your viewing.

We ask that you please look into this matter and inform us of your findings we are unsure as to what to advise our client to do at this point. Our client is anxious to resolve this misunderstanding and remain his corporation as active in the State of Florida.

We thank you in advance for your cooperation and understanding in this matter. If we can be of any further assistance, please do not hesitate to contact us.

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ng Professionals Group, Inc.