

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

APPROVED AND FILED

99 NOV 15 PM 2:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000077894

1. Corporation Name
ASTON WORLDWIDE ANIMATION, INC.

[Handwritten Signature]

Principal Place of Business Mailing Address
C/O ASTON ENTERTAINMENT GROUP, INC. C/O ASTON ENTERTAINMENT GROUP, INC.
6497 PARKLAND DR., STE. A 6497 PARKLAND DR., STE. A
SARASOTA FL 34243 SARASOTA FL 34243



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		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		09/09/1998	
City & State		City & State		5. FEI Number	
Zip		Country		06-1544819	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	
				\$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director	4. City / State / Zip
D	ASFUR, ANTHONY R	6902 CHICKASAW BAYOU RD.	BRADENTON FL 34203
D	SEXTON, DALE J	10334 PALMBROOKE TERR.	BRADENTON FL 34202

100003042401-3
-11/12/99--01038--018
***450.00 ***150.00

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
ASFUR, ANTHONY R 6497 PARKLAND DR., STE. A SARASOTA FL 34243		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, Etc.	
		City	State FL

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 *[Signature]* Date 11/9/99 *[Signature]*
REGISTERED AGENT MUST SIGN

11. 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]* 11/9/99 - 941-755-6621
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E040 (8/99)



RE: Document # P98000077894
Document # P97000109076
Document # P95000003806

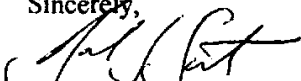
Dears Sirs,

This letter is to inform you that we did indeed comply with the Florida Annual Report deadline for Corporations, and in fact, our accountants have documented information stating that your office has received these filings within the imposed deadline.

Enclosed you will find our reinstatement forms for the three companies in question along with our payment of \$150.00 for each company so we can get our companies back in the "active" status. We are currently undergoing a merger of our companies with a larger entity and this is causing us both a major embarrassment as well as potentially millions of dollars. I am sure this is a small oversight on your departments behalf, due to the thousands of files your office handles each and every month, but we need to get this resolved and the companies reinstated as quickly as possible.

Thank you for your help in this matter.

Sincerely,


Dale J. Sexton
COO

Administrative Offices

6497 Parkland Center • Suite A • Sarasota, Florida 34243 • Tel: 941.755.6793 • Fax: 941.755.6857
webpage: www.astontent.com • email: astontent@aol.com