PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED FLORIDA DEPARTMENT OF STATE **CORPORATION** Secretary of State REINSTATEMENT 09 DEC 11 PM 4: 59 DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSFE FLORIDA DOCUMENT # 75814/ 1. Corporation Name Florida World Organization of China Painters, INC. 2. Principal Office Address - No P.O. Box # 3. Mailing Office Address 1707 Round Pond Ave 1707 Round Pand Ave CR2E081 (12/07) Suite, Apt. #, etc. Date Incorporated or Qualified Tanipa FL City & State Tampe FL City & State To Do Business in Florida Not Applicable 33612-3922 Hills borough \$8.75 Additional Fee required Hillsborough for a Certificate of Status 7. Name and Address of Current Registered Agent The reinstatement fee is imposed, except in Anetha circumstances which the entity did not receive Street Address (P.O. Box Number is Not Acceptable) the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived. State Zip Code 700163541627 |2/11/09--01040--015 +*70.00 12-3942 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 Date Morenise 25, 2009 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each City / State / Zip Officers and/or Directors Co-Joyce Beiss 1901 Terry Lane FI 33413-4144 Judi Brogden 106 Silver Falls Dr. APOllo Beach FL 33572 3812 Cardenal Ave. Ruskin FL 33573-6735 Tampa FL 33611-5602 6343 Wood Valley Rd.

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 contained in Chapter 119, 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.

1202 Arlinbrook Dr.

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Jacksonville FL 32217-245

Trinity FL 34655