

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 03 JUN 24 AM 11:44 SECRETARY OF STATE ALLAHASSEE, FLORIDA 202-1BR 400021090864 06/24/03--01008--002 **300.00 02-03	
DOCUMENT # F94000000241			
1. Corporation Name SPARKNIGHT INC.			
2. Principal Office Address 1335 Sutter Street Suite, Apt. #, etc. City & State San Francisco, CA Zip 94109 Country USA		3. Mailing Office Address 1335 Sutter Street Suite, Apt. #, etc. City & State San Francisco, CA Zip 94109 Country USA	
4. Date Incorporated or Qualified To Do Business in Florida 1/18/94		5. FEI Number 942707874 Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent Name Nicholas A. Pope Street Address (P.O. Box Number is Not Acceptable) c/o LOWNDES, DROSDICK, DOSTER, KANTOR & REED Suite, Apt. #, Etc. 215 N. Eola Drive City Orlando State FL Zip Code 32801			
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 <i>Nicholas A. Pope</i> REGISTERED AGENT MUST SIGN Date 6/19/03			
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
DP	Chien E. Liew	5760 South Semoran Blvd.	Orlando, FL 32822
DVP	Randall E. Kay	1335 Sutter Street	San Francisco, CA 94109
DS	J. Lani Bader	1335 Sutter Street	San Francisco, CA 94109
S	Carolyn J. Tawasha	1335 Sutter Street	San Francisco, CA 94109
T	Randall E. Kay	1335 Sutter Street	San Francisco, CA 94109
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: <i>Randall E. Kay</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		6/18/03 (415) 345-1170 Date Daytime Phone #	

CR2E081 (10/02)

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KAY & TAWASHA LLP
ATTORNEYS AT LAW
THE GRABHORN PRESS BUILDING
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June 18, 2003

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

Re: *Sparknight Inc.*
FEIN: 942707874

To Whom It May Concern:

Enclosed please find a Corporation Reinstatement form in connection with the above-referenced corporation.

Our office did not receive Uniform Business Report forms for the years 2002 and 2003 and have just now realized that the corporation has been "dissolved."

I also enclose a check in the sum of \$300.00 representing \$150.00 for each year. We ask that the late fees be waived because we did not receive the annual forms.

If you have any questions, please do not hesitate to contact the undersigned. Thank you for your assistance in this matter.

Very truly yours,

KAY & TAWASHA LLP



Daniele P. Campion
Legal Assistant