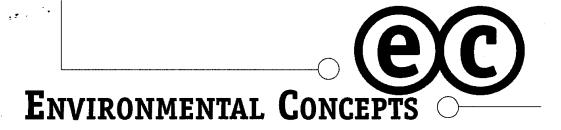
,PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **Katherine Harris** Secretary of State 01 NOV 21 PM 12: 17 DIVISION OF CORPORATIONS DOCUMENT # F96000005242 1. Corporation Name Luster Leaf Products, Inc. 2. Principal Office Address 3. Mailing Office Address 2220 Techcourt c/o Robert M. Donlon Suite, Apt. #, etc. Suite, Apt. #, etc. 4440 PGA Blvd.; Ste. 307 Date Incorporated or Qualified To Do Business in Florida August 1996 City & State City & State 5._FEI.Number Applied For -Woodstock, IL P.B. Gardens, FL Not Applicable 58-0912963 Country Zio Country 60098 \$8:75 Additional Fee require for a Certificate of Status 33410 CERTIFICATE OF STATUS DESIRED 7. Name and Address of Current Registered Agent Robert M. Donlon 700004711267- -12/06/01--01034--0 Street Address (P.O. Box Number is Not Acceptable) Bush & Donlon, P.A. Suite, Apt. #, Etc. 4440 PGA Blvd.; Ste. 307 Zip Code FL Palm Beach Gardens 3410 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 REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director Name of Officers and/or Directors Titles City / State / Zip PD Larry L. Holbein 2220 Techcourt Woodstock, IL 60098 \bar{s} Margaret Godfrey 2220 Techcourt Woodstock, IL 60098 TDCarol T. Holbein 2220 Techcourt Woodstock, IL 60098 Ð. 2220 Techcourt Rex W. Grimes Woodstock, TI_60098. 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.

ME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:



November 20, 2001

Florida Department of State **Division of Corporations** 409 East Gaines Street Tallahassee, FL 32399

Good Morning!

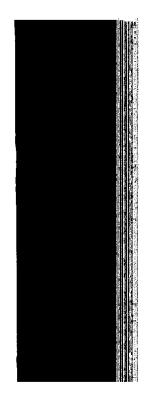
Our registered agent in Florida, Mr. Robert Donlon changed his address on our 2000 annual corporate report (see copy). However, the address was not changed and the 2001 form was never received. We only discovered it was not filed when we were reviewing tax payments in Florida.

Per the instructions on your department's voice mail we are sending a completed "Corporation Reinstatement" form and a check for \$150.00 for the 2001 filing fee.

Please be sure that your records on Mr. Donlon's address are changed at once so we can file our 2002 report on time.

Larry L. Holbein

President, Luster Leaf Products, Inc.





(815) 337-5560 800-327-4635 Fax: (815) 337-5567