PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PERSERVEN ALE INSTRUCTIONS BEFORE SOME EXTRACTION OF THE STATE OF THE				
CORPORATION REINSTATEMENT	DEPARTMENT OF STATE Katherine Harris Secretary of State SION OF CORPORATIONS	02	SIGN OF CORPORATIONS	
DOCUMENT#LO3827				
1. Corporation Name Shinohaka USA Inc.		6000049118163 -02/12/0201055015 ****150.00 ****150.00		
2. Principal Office Address 7503 Philips Hwy 7503 Suite, Apt. #, etc. 3. Mailing C	office Address B Philips Huy etc.	6	00004911816 -02/12/0201055 ****150.00 *****1	:3 -016 ISD.00
Suite 101 Suite	e 101		orated or Qualified 7/24/8	9
Jacksonville FL Jack	SONVIlle FL	FEI Number		led For Applicable
39a50 05A 38a5	56 USA	6. CERTIFICATE	OF STATUS DESIRED 58.75 Additional F	
7. Name and Address of Current Registered Agent				
Street Address (P.O. Box Number is Not Acceptable) TOUS Philips Husy Suite, Apt. #, Etc. City City CICKSONVILLE State Zip Code FL 33350				
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 Park REGISTERED AGENT MUST SIGN Date 18. In the image of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. REGISTERED AGENT MUST SIGN				
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 Mikio Shinohaea	265 6 Chome C	hiyoda	Shi xwoka, Japan	420
VP Philip Speett	1849 DONALD ST		Incksonville, FL 386	70B
VPST Shinbuke Kubota	3407 Brookemad	e DR	Polling Meadows ILI	(40008)
	·	·	1/2/7	
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: Chief				

Shinohara USA East

7563 Philips Hwy Suite 101 Jacksonville, FL 32256 904-296-8474 904-296-8477 fax

January 17, 2002

Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

In regards to document number L03827 (Shinohara USA Inc.) our status in the state of Florida is inactive. This is due to the fact that uniform business report was not filled from Shinohara USA Inc for the years of 2001 and 2002.

The reason that the uniform business report was not filed by Shinohara USA Inc. for the years of 2001 and 2002 was due to an address change.

Our previous address was listed as: Shinohara USA Inc 8188 Baymeadows Way West Jacksonville, FL 32256

Our new address is listed as: Shinohara USA Inc 7563 Philips Hwy Suite 101 Jacksonville, FL 32256

Shinohara is enclosing two (2) corporation reinstatements for the years of 2001 and 2002 along with a check made payable to Department of State for the amount of \$ 300.00. Which is broken down to the reinstatement fee of \$ 150.00 for the year 2001 and a reinstatement fee of \$ 150.00 for the year 2002.

If you have any questions please call our office at 904-296-8474.

Sincerely,

Philip C. Jarrett General Manager