

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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LIMITED LIABILITY COMPANY UBR 2000 & 2001
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

M98000001452 FILED

01 JAN 19 AM 10:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M98-1452
1. Limited Liability Company's Name
F.A.I. Tyrone, LLC

2. Principal Office Address
c/o Cursor Corporation
Suite, Apt. #, etc. Suite
130 Bloor St. W #1200 Suite #1200
City & State Toronto ON
Zip Country M5S 1N5 Canada

3. Mailing Office Address
130 Bloor St. W
Suite, Apt. #, etc. Suite #1200
City & State Toronto ON
Zip Country M5S 1N5 Canada

4. State/Country of Formation North Carolina
5. Date Organized or Qualified To Do Business in Florida November 17, 1998
6. FEI Number 98-0196784
7. CERTIFICATE OF STATUS DESIRED \$5.00 Additional Fee required for a Certificate of Status

8. Name and Address of Current Registered Agent
Name CT Corporation System
Street Address (P.O. Box Number is Not Acceptable)
11 Eighth Avenue 1200 South Pine Island Rd
Suite, Apt. #, Etc.
City New York, NY Plantation State FL Zip Code 33324

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.
Signature of Registered Agent Vicky Goldstein
VICKY GOLDSTEIN SPECIAL ASSISTANT SECRETARY Date 12/22/00
REGISTERED AGENT MUST SIGN

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	4000003602164-6 -01/30/01--01098--009 ****100.00 State ****100.00
President	Fedor Frastacky	130 Bloor Street West	Toronto, ON, CAN

AR-100
THIS IS THE UNIFORM BUSINESS REPORT FOR THE YEARS 2000 AND 2001.
MK
1/19

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. 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 of Managing Member/Manager Fedor Frastacky Date October 20, 2000 Daytime Phone # (416) 928-1400
Typed or printed name of signing Managing Member/Manager

CR2E041 (9/00)

M98000001452

CURSOR CORPORATION
130 Bloor Street West, Suite #1200
Toronto, Ontario M9V 2H5
Canada
(416) 928-1400
(416) 963-8786 Fax

BY COURIER

December 21, 2000

Florida Department of State
Division of Corporations
Registration/Partnership Section
409 E. Gaines Street
Tallahassee, FL 32399
USA

Phone: 1(850) 487-6051

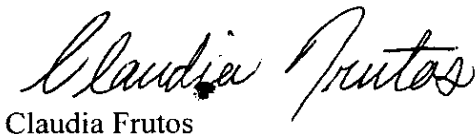
RE: F.A.I. TYRONE, LLC

Further to your letters dated October 30, 2000 and December 11, 2000 attached hereto, please find enclosed the Limited Liability Company Reinstatement for F.A.I. Tyrone, LLC.

In various telephone conversations with representatives of the Florida Department of State during the past few weeks, I was advised that as we did not receive the 2000 annual reports/uniform business reports for above Limited Liability Company and therefore unable to file this report with your department, the reinstatement charges would be waived.

We trust that the above is correct and satisfactory to you and are forwarding the documents by courier. Should you have any questions or require additional information, please do not hesitate to contact me by phone or fax.

Sincerely,
On Behalf of
CURSOR CORPORATION


Claudia Frutos

Enc.

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