2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Sep 22, 2005
Secretary of State

DOCUMENT# N01000003853

Entity Name: OPERATION AFRICA, INC.

Current Principal Place of Business:

1102 BLUE HERON LN., W
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

1102 BLUE HERON LN., W
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 59-3721904 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCHENDRY, PETER
1102 BLUE HERON LANE W.
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: PETER MC HENDRY

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: MCHENDRY, PETER
Address: 11562 N TREASURY CIR
City-St-Zip: JACKSONVILLE, FL 32246

Title: D ( ) Delete
Name: PELHAM, ANN
Address: 74 KRANTZVIEW ROAD
City-St-Zip: FLOOF, NATAL SOUTH AFRICA, SA 3610

Title: D (X) Delete
Name: VOKER, GUNTER
Address: UNIT 1, 25 KRANTZVIEW ROAD
City-St-Zip: KLOOF, NATAL, SOUTH AFRICA, SA 3610

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: MCHENDRY, PETER
Address: 1102 BLUE HERON LANE WEST
City-St-Zip: JACKSONVILLE, FL 32250

Title: D (X) Change ( ) Addition
Name: MC HENDRY, ANNE
Address: 1102 BLUE HERON LANE WEST
City-St-Zip: JACKSONVILLE, FL 32250

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER MC HENDRY DP 09/22/2005

Electronic Signature of Signing Officer or Director — Date