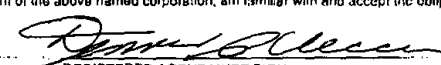
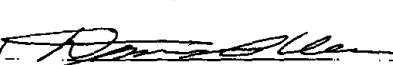


09/26/2001 13:47 FAX 407 4231831

DEAN MEAD ORLANDO

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA 01 OCT 17 PM 7:24	
DOCUMENT #N96000000544 1. Corporation Name WORLD OF KNOWLEDGE FOUNDATION, INC.					
4037 METRIC DRIVE					
2. Principal Office Address 120 University Park Drive		3. Mailing Office Address P. O. Box 1024		200004662762--4 -11/01/01--01050--012 ****236.25 ****236.25	
Suite, Apt. #, etc. Suite 140		Suite, Apt. #, etc.		REINSTATEMENT 2001	
City & State Winter Park, FL		City & State Goldenrod, FL		4. Date Incorporated or Qualified To Do Business in Florida 01/30/1996	
Zip 32792	Country US	Zip 32733	Country US	5. FEI Number 65-0715728	
6. CERTIFICATE OF STATUS DESIRED ☐				\$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name VECCIA, DENNIS P.					
Street Address (P.O. Box Number is Not Acceptable) 120 University Park Drive, Suite 150 4037 METRIC DRIVE					
Suite, Apt. #, Etc.					
City Winter Park,				State FL	Zip Code 32792
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 ☒				Date 9/25/01	
REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip		
DT	Lauri Lott	4037 METRIC DRIVE SUITE 110	WINTER PARK, FL 32792		
DS	Michele Baker	4037 METRIC DRIVE SUITE 110	WINTER PARK, FL 32792		
DP	SAMUEL CHARANI	4037 METRIC DRIVE SUITE 110	WINTER PARK, FL 32792		
DCS	DENNIS P. VECCIA	4037 METRIC DRIVE SUITE 110	WINTER PARK, FL 32792		
SD	HAFAIDIA PHAIBI	4037 METRIC DRIVE SUITE 110	WINTER PARK, FL 32792		
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: 		DENNIS P. VECCIA DIRECTOR		(407) 384-4220	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

CRE001 (8-99)