

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>N98000006266</u>			
1. Corporation Name <u>Tomorrow's Hope, Hi Tech, Inc</u>			
2. Principal Office Address <u>5310 Alpha Drive</u> Suite, Apt. #, etc.		3. Mailing Office Address <u>5310 Alpha Drive</u> Suite, Apt. #, etc.	
City & State <u>Orlando FL</u>		City & State <u>Orlando FL</u>	
Zip <u>32810</u>	Country <u>USA</u>	Zip <u>32810</u>	Country

FILED
02 NOV 27 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 02
600009238176
11/27/02--01040--001 **245.00

4. Date Incorporated or Qualified To Do Business in Florida	
5. FEI Number <u>59-3545246</u>	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent		
Name <u>Beverly Biemiller</u>		
Street Address (P.O. Box Number is Not Acceptable) <u>5310 Alpha Drive</u>		
Suite, Apt. #, Etc.		
City <u>Orlando</u>	State <u>FL</u>	Zip Code <u>32810</u>

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 Beverly Biemiller Date 11/21/02
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
P	Beverly Biemiller	7231 Belasco Ave	Orlando, FL 32810
D	Daniel Novatnak	3128 Albin Lane	Orlando, FL 32817
D	Nanus, Fred CPA	4819 Shoreline Circle	Sanford, FL 32771
D	Haft, Arthur	157 Country Creek Rd #211	Lake Mary, FL
S	VanZandt, Stephen	3233 140 Birchwood Dr	Maitland, FL 32751

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: Beverly Biemiller Date 11/21/02 Daytime Phone # 407-523-1435
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E081 (9/01)

gt 12/4/02