PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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). I certify th	nat I am an o	fficer or director or the receiv	ver or trustee er	mpowered to	execute this appli	cation as n	rovided for in ch	apter 607 or	617 FS	further cert	ify that whe	n filing		
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Destina Dhana #

MUFASA INC.

5023 STARFISH DRIVE S.E. #E ST. PETERSBURG, FLORIDA 33705

February 11, 2002

DEPARTMENT OF STATE DIVISION OF CORPORATIONS P.O. BOX 6327 TALLAHASSEE, FL. 32314

Dear Sir or Madam:

My name is Ada P. Oli; I am a founding partner of MUFASA INC. It was recently brought to my attention (appx. 1 week ago) that our Corporation needed to be reinstated. Upon speaking to one of your very helpful representatives I was informed that we were to file an annual report and submit an annual fee, we were not given this instruction by our Attorney at the time of our incorporation process. Also, the representative informed me that initial notice was sent to a law office in Coral Gables, which I believe assisted our Attorney in the incorporation process. I do not know if this information was forwarded to our Attorney, but the notice never reached any of the three MUFASA INC. partners.

The representative did also inform me that there was a contact address listed for one of the partners as 4794 Cobia Dr. – St. Pete. Fl. 33705. I have spoken to Traci Clinton, and she reports that she did not receive any notices whatsoever on this. We are thereby requesting that because of this the \$175 penalty fee be waived.

I have diligently been working to clear up this problem and I can assure you that we did not get notice, had we known we would have complied. As advised by your representative, in addition to this letter we are sending in the \$61.25 per year for the past 3 years for a total of \$183.75 plus we are adding an additional \$8.75 for current certificate of status for a total of \$192.50.

Sincerely,

Ms. Ada P. Oli V.P. MUFASA, INC.