PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORMLED

| CORPORATION DELIVORATION DELIVO | | | FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS | | | | 02 APR 15 PM 2: 20 SECRETARY OF STATE TALLAHASSEE, FLORIDA | | | | | | |
|--|---------------------------------------|---|---|---------------------|---|-------------------|--|------------|------------------|---------------|-------------|-----------|----------------|
| 1. Corpora | | # P000000! | 50003 | | _ | | İ | | | | | | |
| C | ne-Wa | y Stucco Ent | terprises | , I | nc. | | | | | | | | |
| | I Office Addre | | 3. Mailing Office Address | | | | . 3 | 000 |) | .732 | .9E | } | 1 |
| Suite, Apt. # | | iew Way | 1010 Creighton Road Suite, Apt. #, etc. | | | | | * | ***345 | .80 * | ***3 | 10.00 | |
| | | | \$ | | | | 4. Date Incom | porated or | | | | | 7 |
| City & State Pens | acola | , FL | City & State -Pensacola, FL | | | | To Do Business in Florida May .15, 2000 5. FEI Number Applied For | | | | | | |
| 32503 Country Escambia | | | ^{z_{in}} 32503 | | Country Escambia | 6. CERTIFICATI | E OF STATU | S DESIRED | \$8.75 Add | ditional F | Applicable | _ | |
| | Name | | 7. Name | and Ad | dress of Current R | Registere | ed Agent | " | | ior a Ce | tulicate | of Status | |
| 8. I, being | Suite, Apt. | Kievit, Kelless (P.O. Box Number is No. 15 West Mains, Etc. Pensacola registed agent of the abo | ot Acceptable) Ln Street | | miliar with and acce | ot the ch | | State FL | Zip Code 3250 | | | | 1 ຄ |
| Signature of Registered A | | All the | GISTERED AGENT | 1 | Lelly | | | Date _ | | 10/02 | ? | | CR2E081 (9/01) |
| 9. Names | and Street Ad | dresses of Each Officer and | | | | ev S | Odom. | | sident | . 11 | <u> </u> | 1 | ľ |
| Titles | | Name of Officers and/or Directors | Street Address of Eac Officer and/or Directo | | | | st 3 directors) | Kre | vit, K City | / State / Zip | | dom | 1 |
| D,P | Stepl | 2 | 2835 Bayview Way | | | | Pensacola, FL 32503 | | | | | | |
| D,S,T | Mell | 2 | 835 | Bayview Way | | | Pen | sacola | FL | 32 | 2503 | - | |
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| | · · · · · · · · · · · · · · · · · · · | | | | <u> </u> | - | | 5 | P418 | | | - | |
| owed by | y the corporati | officer or director or the receivalication, the reason for disson on have been paid and the rue and accurate, and my signature and accurate and my signature. | names of individuals | listed on e same | this form do not quallegal effect as if mad | ialisiles (| ne requirements | | | | | | |

2835 Bayview Way Pensacola, FL 32503 March 21, 2002

Florida Dept. of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: One-Way Stucco Enterprises, Inc.

Ladies & Gentlemen:

One-Way Stucco Enterprises, Inc., was involuntarily dissolved for failure to file its Uniform Business Report for 2001. At the time forms for this report were sent out the other principal in the business and I were in the process of terminating our association. Even though I continued the business and he withdrew from it, I know that he received mail intended for the corporation and failed or refused to forward it to me. In all probability the form for the Uniform Business Report and any other notices related to it were destroyed by my former associate.

Because I did not receive this form or any related notices I ask that your office waive payment of the reinstatement fee.

Thank you for giving this your consideration.

- -- Very truly yours, ---

Stephen Davis, President

One-Way Stucco Enterprises, Inc.

SD/RWK:skh

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