PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. PLUTE HARY OF STAIR. VISION OF CORPORATION FLORIDA DEPARTMENT OF STATE Katherine Harris 02 FEB -8 AM 10: 42 Secretary of State **DIVISION OF CORPORATIONS** P000000 95888 DOCUMENT # 1. Corporation Name Global Services Company, Inc 300004926483--8 -02/14/02--01061--020 3. Mailing Office Address 2. Principal Office Address 2501 E. Commercial Blud. sanc \*\*\*\*150.00 \*\*\*\*150.00 4. Date Incorporated or Qualified To Do Business in Florida City & State City & State 5. FEI Number Applied For Ft. Lander dalc, Fl Not Applicable <sup>Zip</sup> 33308 Country \$8.75 Additional Fee required USA for a Certificate of Status 7. Name and Address of Current Registered Agent 1411:50n <del>904926483</del> -02/1<u>4/</u>02--01061-Street Address (P.O. Box Number is Not Acceptable) スタロロ Commercia \*\*\*\*150.00 \*\*\*\*150.00 Sulte, Apt. #, Etc. Sute State Zip Code 33308 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. Date 1-15-02 Signature of Registered Agent 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
D P,S,T	Sheri Blanche	1731 SE. 15th Street # 514	F4. Landerdale, FC
			19212

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 according, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND PROPER OR PRINTED HAME OF SIGNATURE OFFICER OR DIRECTOR

0/1900 954 447 900 Date Delytime Phone # Tao Global Services Company, Inc. 2501 E. Commercial Blvd., Suite 101 Fort Lauderdale, FL 33308 (954) 553-0205

January 15, 2002

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

Re:

Tao Global Services Company, Inc.

P00000055888

Dear Sir or Madam:

This letter is a request for waiver of reinstatement fees for my corporation.

I am not very sophisticated in corporate filings and at this point I am unable to afford an attorney to handle matters for me since my corporation is operating at a loss. Unfortunately, I did not receive the uniform business reports due to my business address changes. For some reason the reports were not forwarded to me.

Please accept my check for \$150.00 and let me know if I owe monies for the year 2001. I have been through some extreme financial hardships and appreciate any help you can give me with the reinstatement of my corporation.

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