PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1 of 2

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
02 FEB 26 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000077397

1. Corporation Name

Empire Diamonds and Jewelry MFG., Inc.

2. Principal Office Address	**3.** Mailing Office Address
515 E. Altamonte Dr.	515 E. Altamonte Dr.
Suite, Apt. #, etc.: Ste 1014	Suite, Apt. #, etc.: Ste 1014
City & State: Altamonte Springs FL	City & State: Altamonte Springs FL
Zip: 32701 Country: USA	Zip: 32701 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 8/16/00

5. FEI Number: 59366 9554 — Applied For ☐ Not Applicable ☐

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: Lei Elaine McManus

Street Address (P.O. Box Number is Not Acceptable): 225 Flame Ave

300005065323--4
-03/08/02--01003--018
****150.00 ****150.00

Suite, Apt. #, Etc.:

City: Maitland | State: FL | Zip Code: 32751

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: 11-17-01
REGISTERED AGENT MUST SIGN

CR2E081 (9/00)

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	Lei Elaine McManus	515 E. Altamonte Dr. Ste 1014	Altamonte Springs, FL 32701
			300005065323--4 -03/08/02--01003--019 ****150.00 ****150.00

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: _____ Lei Elaine McManus 11-17-01 (407) 831-7056
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

To whom it may Concern

Per Our Conversation with Michelle Milligan on December 7, 2001 I am enclosing two checks for 150.00 ea. for year 2001 + 2002 as requested by you do to the fact that we did not recieve our ~~reinstate-~~ ment application UBR

Thank you,

Lu McBrawn