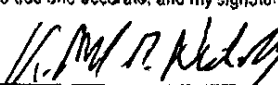


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # CORPORATION REINSTATEMENT		1 NOV -6 PM 12:17	
1. Corporation Name WEBIX INC. P-107537		SECRETARY OF STATE TALLAHASSEE, FLORIDA	
2. Principal Office Address 2075 S. OCEAN BLVD		3. Mailing Office Address 36 WEST 44 TH STREET	
Suite, Apt. #, etc. #5D		Suite, Apt. #, etc. SUITE 1209	
City & State DELRAY BEACH, FL		City & State NEW YORK, NY	
Zip 33483	Country USA	Zip 10036	Country USA
4. Date incorporated or Qualified To Do Business in Florida 11/17/2000		5. FEI Number 65-1075431	
6. CERTIFICATE OF STATUS DESIRED ☒		Applied For Not Applicable	
7. Name and Address of Current Registered Agent			
Name DOAK S. CAMPBELL, III			
Street Address (P.O. Box Number is Not Acceptable) 70 S.E. FOURTH AVENUE			
Suite, Apt. #, Etc.			
City DELRAY BEACH		State FL	Zip Code 33483
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 Doak S. Campbell		Date NOVEMBER 5, 2001	
REGISTERED AGENT MUST SIGN			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D.	K. RICHARD B. NIEHOFF	622 PELHAMDALE AVE.	PELHAM MANOR, NY 10803
P.	K. RICHARD B. NIEHOFF	622 PELHAMDALE AVE.	PELHAM MANOR, NY 10803
V.S.	JEFFREY M. SCHAEFER	6856 WEST LISERON	BOYNTON BEACH, FL 33437
V.	MOLLY G. BAYLEY	1125 ASHLAND AVE.	WILMETTE, IL 60091
			100004698251--7
			-11/29/01--01046--027
			*****750.00 *****750.00
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: 		K. RICHARD B. NIEHOFF	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date NOV. 5, 2001	Daytime Phone # 646-728-7023

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