PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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REINSTATEMENT 01

DOCUMENT # P00000117034.

1. Corporation Name JBP International, Inc
3100 22ND AVE North.

2. Principal Office Address	**3.** Mailing Office Address
3100 22nd Ave North.	310 N. Central Way
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: St. Petersburg, FL	City & State: Kent, Washington
Zip: 33713 Country: Penallas.	Zip: 98032 Country: King.

4. Date Incorporated or Qualified To Do Business in Florida: 12-18-2000

5. FEI Number: 59-3746046 (Applied For / Not Applicable)

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

7. Name and Address of Current Registered Agent

Name: John Bonkalis.

Street Address (P.O. Box Number is Not Acceptable): 2652 St. Joseph Drive West.

Suite, Apt. #, Etc.:

City: Dunedin, FL. State: FL Zip Code: 34698

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: J. Bonkalis — REGISTERED AGENT MUST SIGN

Date: 10/25/01.

CR2E061 (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
PRES	John Bonkalis.	2318 SW 120th St.	Seattle, Wash 98146.
TREAS.	William Bonkalis.	12205 Shorewood Dr.	Seattle, Wash 98146.
Secr.	Paul Carter.	16134 SE 33rd LN.	Bellevue, Wash. 98008

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: X J. Bonkalis JOHN BONKALIS President 10-25-01 (253)852-2797

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #