
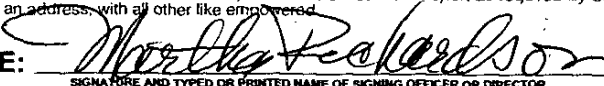


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

| | | | |
|---|---|---|---|
| DOCUMENT # P01000105203 | |  | |
| 1. Entity Name MICRO HYBRIDS, INC. | | | |
| DO NOT WRITE IN THIS SPACE | | | |
| 2. Principal Place of Business 2100 NE DIXIE HWY Suite, Apt. #, etc. | | 3. Mailing Address SAME Suite, Apt. #, etc. | |
| City & State JENSEN BEACH, FL | | City & State | |
| Zip 34957 | Country USA | Zip | Country |
| 4. FEI Number 11-2737607 | | <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | \$8.75 Additional Fee Required | |
| 7. Name and Address of Current Registered Agent | | | |
| Name MARTHA RICHARDSON | | | |
| Street Address (P.O. Box Number is Not Acceptable) 4680 NE SANDPESSE TRACE | | | |
| APT 304 | | | |
| City STUART | | FL | Zip Code 34996 |
| 8. The above named entity submits this Statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. | | | |
| SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | |
| January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Florida Department of State. | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PRESIDENT MARTHA RICHARDSON 4680 NE SANDPESSE TRACE - APT 304 STUART, FL 34996 | TITLE NAME STREET ADDRESS CITY-ST-ZIP | 4680 NE SANDPESSE TRACE - APT 304 STUART, FL 34996 |
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| DO NOT WRITE IN THIS SPACE | | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered. | | | |
| SIGNATURE:  | | Date _____ Daytime Phone # _____ | |

FILED
03 NOV 14 PM 2:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
500024705945
11/14/03--01042--016 **150.00

REINSTATEMENT

CR2E034B (12/02)

TR

To: Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

ATTN: Division of Corporate Reinstatements

From: Martha Richardson
Micro Hybrids
4680 NE Sandpebble Trace
Apt 304
Stuart, FL 34996

Date: 11-4-03

Subject: Corporate Reinstatement of Micro Hybrids, Inc.
Document # P01000105203

I just received the Certificate of Dissolution (copy attached) for my corporation. This is the first documentation that I have received on this matter. Both my business address and home address changed and I did not receive the previously sent UBR notices. Therefore, I downloaded the UBR form and am asking for reinstatement of my corporation, Micro Hybrids, without penalties. I have completed the new form with my new addresses. You can check to see that where you sent the previous UBR's were to my old addresses. The only document that I received, which was Dissolution notice, was sent to my new address.

I have enclosed the new UBR form and my check for \$ 150.00. PLEASE reinstate my corporation ASAP without penalties.

Thank you very much.

Yours truly,

A handwritten signature in black ink that reads "Martha Richardson". The signature is fluid and cursive, with the first name "Martha" being more prominent and the last name "Richardson" following in a similar style.

Martha Richardson