PLEASE PL	FLORID	RUCTIONS A DEPARTMEN Sandra B. Mor Secretary of S VISION OF CORPOR	NT OF STATE	OMPLETING	THIS FORM.	リレ LED
DOCUMENT # POI 1. Corporation Name · ADUIT Wa	000105936 add Entent	noment (conp.	20 be	O3 MAY - SECRÉTAI TALLAHAS	RY OF STATE SEE, FLORIDA
Principal Place of Business (800 FUNCEST ST Hollywood, FL 330	- 0	ess 00 forrest 112 wood, fl	1	♪` 800 05/06/03	0 0183125 301124008	 68 ** ^{300,00} ~7A;
If above addresses are incorrect in any way, line through incorrect in 2. New Principal Office Address, If Applicable 3. New Mail Suite, Apt. #, etc. Suite, Apt. # City & State City & State		ng Office Address, If Applicable 4.		4. Date Incorporated or Qualified To Do Business in Florida /// Z / 0 / -5FEI Number Applied For Not Applicable		
Zip Country 7. Names and Street Addresses of Each	Zip Officer and/or Director (Flo	Country	<u> </u>			Additional Fee required a Certificate of Status
Name of Officers and/or Directors Name of Officers and/or Directors Name of Officers and/or Directors		Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 6 800 Fornest St			City/State	EC 33024
VP Gunter	KANSYAL	6800 Fe	mest St	/	Hollywood, x	CL33024.
8. Name and Address	of Current Registered Age	nt	Namei). Name and Addre	ss of New Registered Ag	ent
			Street Address (P.O. Suite, Apt. #, Etc.	<u>-, 1 - </u>	State	Zip Code 27024
10. I, being appointed the registered ager Signature of Registered Agent	nt of the above named corporate REGISTERED AS	oration, am familiar wi	,	gations of Section 60	FL 7.0505, F.S. ate	33024 , 03
11. This corporation owe Intangible Personal			ar Yes)No [(See other side for on intangib	

12. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Adult World Entertainment Corp. . 6800 Forrest St Hollywood FL 33024

April 30, 2003

Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314

Subject: Adult World Entertainment Corp

Ref. Number: P01000105936-

To Whom It May Concern:

After reviewing our records, we realized we did not receive any notice for the annual report for 2002(UBR-2002). We have previously changed our address so maybe it was mailed to the prior address.

We have enclosed the reinstatement fee for 2002 in the amount of \$150 per telephone conversation with Division of Corporations. Thank you for waiving any late fees that may have occurred.

We have also enclosed the Reinstatement Document along with the \$150 due for 2003.

Respectfully Submitted,

Blanca R Kangyal, President

NEW ADDRESS: 6800 Forrest St

Hollywood, FL 33024 -