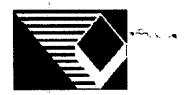
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 04 AUG 25 PH 12: 28						
DOCUMENT # PO 2000743-73 1. Corporation Name					S TA	ECRETAIS LLAHASSE	E, FLORIC	Ā		
S	OLAR TECH	HOLOGY	systems,1	MC						
P	02006843	73								
2. Principal Office		1 -	3. Mailing Office Address			ETT PA Francisco Au		•		
2330	POLK STREET	P.O.BOX 6465			REINSTATEMENT 18 30					
Sulte, Apt. #, etc.	11	Suite, Apt. #, etc.			4 - Date incom	orated or Qualified	d:	124-	7-	
Sul T	E 6	City & State				ness in Florida		12-2002		
	os. Francisco	FORT LAYDERDALE, FLORIDA			5. FEI Numbe			Applied For		
Zio	OD FLORIDA Country	Zip Zip	Country	CIPA	02-05	81847		Not Applicab		
33020	USA	33310	USA		6. CERTIFICATE	OF STATUS DESIR	ED S8.75 Ac	lditional Fee requi Certificate of Statu	rec s	
	ř	7. 1	Name and Address of Curre	ent Register	ed Agent		-			
Name	KOLAWOLE	ABEBA	140							
Street Address (P.O. Box Number is Not Acceptable) 2330 POLK STREET					10	00040	5010			
	Apt. #, Etc. Suife					x'04 - 610	,4 -13152 -	** 381 .00		
City						State Zip Code FL 33020				
8. I, being appointe	ed the registered agent of the al	ove named corp	oration, am familiar with and	accept the ol	oligations of section	on 607.0505 or 61	7.0503, F.S.		(01/0/	
Signature of Registered Agent REGISTERED AGENT MUST SIGN						Date 0	8-20-	04	CR2E081 (01/04)	
9. Names and Str	eet Addresses of Each Officer a	nd/or Director (Fi	orida nonprofit corporations r	must list at le	ast 3 directors)				┫ .	
Titles	Titles Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zlp			
P/10 K	KOLAWOLE ADEBAYO		2330 POLK STREET, SUITE 6			HOLLTHOOD, FL 33020				
S/8 L	AURALIH DEN	MIS	2330 POLK	STREE	ī, suite 6	HOLL-INC	001, FL .	33020		
				· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·	\dashv	
		<u> </u>		<u> </u>						
	· }						,			
this reinstateme owed by the co	m an officer or director or the re- ent application, the reason for di- proration have been paid and the ion is true and accurate, and my	ssolution has bee e names of Indivi r signature shall h	n eliminated, the corporate n duals listed on this form do n ave the same legal effect as	ame satisfies ot qualify for if made unde	the requirements an exemption und roath.	of section 607.04 er section 119.07(01 or 617.0401, I (3)(i), F.S. The inf	F.S., that all fees ormation indicated		
SIGNATURE			WLE ALEBAY BIGNING OFFICER OF DIRECT	·	Q.A-:	20-04 Date	954.21 Daytime F	42 289 8 Phone #		





SOLAR TECHNOLOGY SYSTEMS, INC.

(When the light goes out, ours stays on)

August 20, 2004

Department Of State Division of Corporations P.O. Box 6327 Tallahasse, Fl 32314

Dear Sirs,

To whom it may concern

We hereby implore you to please waive the late payment fees of \$600.00 for our reinstatement because we never received any notice from the corporation.

Attached herewith is the check for \$300.00 for the due fees.

Thanking you for your understanding.

Regards,

Kolawole Adebayo (President) Solar Technology Systems, Inc