Applied For Not Applicable ditional Fee required ertificate of Status

Ŋ.	FLEASE HEAL	ALL MOTTIC	OTIONS BLI OF	RE COMPLETING THIS FORM.
	PORATION STATEMENT	Sec	PARTMENT OF STA retary of State N OF COHPORATIONS	FILED
1. Comorat Erdely In	ndustries, Inc.	3		O4 NOV 22 PM 1: 21 SECRETARY OF STATE TALLAHASSEE, FLORIDA
	54th Street x 916760	·		
2. Principal Office Address 2081 NE 54th Street		3. Mailing Office Address P.O. Box 916760		DENSTATEMENT O
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida March 27, 2002
City & State Fort Lauderdale, Florida		City & State Longwood, FL		5. FEI Number 20-0951704
Zip Country 33308 Broward		Zip 33308	Country USA	6. CERTIFICATE OF STATUS DESIRED S8.75 Addition for a Certific
	Name George B. Erdely	7. Nали	o and Address of Current Re	egistered Agent
·	Street Address (P.O. Box Number i 2081 NE 54th Street	s Not Acceptable)		
	Suite, Apt. #, Etc.			500043220905 12/06/0401069012 **308
	City Fort Lauderdale			State Zip Code 33308
Signature of Registered		above named corporation	on, am familiar with and accep	of the obligations of section 607.0505 or 617.0503, F.S. Date 11/22/2004

Name of Officers and/or Directors Street Address of Each Officer and/or Director Titles City / State / Zip P/S/T George B. Erdely 2081 NE 54th Street Fort Lauderdale, FL 33308

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.

B, EPDELY -PRES CEUR GE

11/22/2004

954-784-7777

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Erdely Industries, Inc.

FILED

2081 N.E. 54th Street Suite 101

04 NOV 22 PM 1: 2Fert Lauderdale, Florida 33308

Phone 954-784-7777 Email gerdely@wtoy.com

SECRETARY OF STATE TALLAHASSEE, FLORIDA

November 22, 2004

Florida Department of State **Division of Corporations** 409 East Gaines Street Tallahassee, Florida 32399

To whom it may concern.

Please reinstate the above Corporation: Erdely Industries, Inc., Document #P0200035773.

I have provided the attached Reinstatement Form.

Please waive the late filing fee.

Reason: I did not received the form to my attention.

My late wife Gail Erdely previously handled this task for me.

Mrs. Erdely was diagnosed the terminal breast cancer last year and died on July 3, 2004.

I don't know where or if she received the forms.

I can provide the death certificate if necessary.

Thank you for your consideration in this matter.

George B. Erdely

President

Sincerely

Erdely Industries, Inc.