




10/16/2003 THU 11:43 FAX 239 334 4100 Henderson Franklin et al

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FAX AUDIT NO.: H03000298021 3

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		03 OCT 16 PM 3:27 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # P02000059318					
1. Corporation Name PARADIGM RESOURCE GROUP, INC.					
2. Principal Office Address 8088 Cypress Drive, South		3. Mailing Office Address 8088 Cypress Drive, South			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Fort Myers, FL		City & State Fort Myers, FL		4. Date Incorporated or Qualified To Do Business in Florida 05/29/2002	
Zip 33912	Country USA	Zip 33912	Country USA	5. FEI Number 30-0081859	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$3.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name Kenneth H. Hashimoto					
Street Address (P.O. Box Number is Not Acceptable) 8088 Cypress Drive, South					
Suite, Apt. #, Etc.					
City Fort Myers				State FL	Zip Code 33912
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0506 or 617.0503, F.S.					
Signature of Registered Agent 				Date 10/16/03	
REGISTERED AGENT MUST SIGN					
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	
D/P/S/T	HASHIMOTO, KENNETH H.	8088 Cypress Drive, South		Fort Myers, FL 33912	
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)(f), 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: 		Kenneth H. Hashimoto		Date 10/16/03	Daytime Phone # 239-437-2200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

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