PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

TALLAHASSEE. FLORIDA 1. Corporation Name Everything's Afrikan inc 2. Incipal Office Address 41.66 inverrary dr Suite, Apt. #, etc. #406 City & State Lauderhill, Fl Zin Country TALLAHASSEE. FLORIDA TO DE STATE OF TO DE S	CORPORATION REINSTATEMENT FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS								00	FILED 03 OCT 10 PH 3: 38			
2. Explorated Office Address 41.66 invertrary of PO Box 590911 Suite, Apr. #, etc. \$1.0/10/03-01022-015 ***158.75 \$10/10/03-01022-015 ***158.75 \$10/10/03-01022-015 ***158.75 \$10/10/03-01022-015 ***158.75 \$10/10/03-01022-015 ***158.75 \$10/10/03-01022-015 ***158.75 \$10/10/03-01022-015 ***158.75 \$10/10/03-01022-015 ***158.75 \$10/10/03-01022-015 ***158.75 \$10/10/03-01022-015 ***158.75 \$10/10/03-01022-015 ***158.75 \$10/10/03-01022-015 ***158.75 \$10/10/03-01022-015 ****158.75 \$10/10/03-01022-015 \$10/10/03-01022-015 \$10/10/03-01022-015 \$10/10/03-01022-015 \$10/10/03-01022-015 \$10/10/03-01022-015 \$10/10/03-01022-015 \$10/10/03-01022-015 \$10/10/03-01022-015 \$10/10/03-01022-015 \$10/10/03-01022-015 \$10/10/03-01022-015 \$10/10/03-01022-015 \$10/10/03-01022-015 \$10/10/03-0102	DOCUMENT # 02000000000								T,	SECRETARY OF STATE TALLAHASSEE, FLORIDA			
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Lauderhill, F Tamarac, F Sp. FEI Number Applied for Not Applicable Sp. FEI Number Applicable S	#406												
To Name and Address of Current Registered Agent Name	Lauderhill, Fl			Tamara	Tamarac, FI								
Name Kimberly Singleton Street Address (P.O. Box Number is Not Acceptable) 18421 nw 39th ct State State Zip Code 33056 8. I, being appointed the registered agent of the above named corporation, an familiar, with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent Reconstruction Reconstru							· · · · · · · · · · · · · · · · · · ·			E OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status			
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Signature of Registered Agent REGISTERED AGENTINUST 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 Officers and/or Director Officer and/or Director Lauderhill, FI 33319 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 jeghtings its listery on this form do not qualify for an exemption under section 119,07(3)(6), F.S. The Information indicated	. !	^{City} Mia	mi						. •				
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SIGNATURE: JO ANN KAY SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR Dato Dato Dato Daytime Phone #	this reit owed b on this												

EVERYTHING'S AFRIKAN INC C/O JOANN RAY

4166 Inverrary drive #406 Lauderhill, Fl 33319 Phone 054 430-9919 rayjoann@bellsouth.net

October 8, 2003

Mr Tyrone Scott

Mr Scott this is my second time sending my funds for reinstatement for my corporation; per our conversation, I'm sending this again and asking for the late charge to be waived, because I sent the first one on time.

Thank-you, JoAnn Ray (pres)