
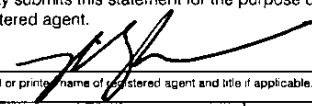
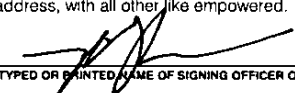


2005 FOR PROFIT CORPORATION REINSTATEMENT

10/25/04 01075 0/6 \$150.-

10/2

DOCUMENT # P03000012408				05 JUL -2 PM 2:22	
1. Entity Name ASPEN LIGHT CONSULTING INC.		Principal Place of Business 6307 COOPERS GREEN CT ORLANDO, FL 32819		Mailing Address 6307 COOPERS GREEN CT ORLANDO, FL 32819	
2. Principal Place of Business 7512 Dr. Philips Blvd. Suite #50 PMB 270 Orlando, FL		3. Mailing Address Suite, Apt. #, etc. → same City & State Orlando, FL		4. FEI Number 42-1574622	
Zip 32819		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ZHAO, CINDY XIN 6307 COOPERS GREEN CT ORLANDO, FL 32819			7. Name and Address of New Registered Agent Name Cindy Zhao Street Address (P.O. Box Number is Not Acceptable) 7512 Dr. Phillips Blvd. Suite 50-270 City Orlando FL Zip Code 32819		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE 		(NOTE: Registered Agent signature required when reinstating)		DATE 3/31/05	
FILE NOW!!! FEE IS \$300.00			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ZHAO, CINDY 6307 COOPERS GREEN CT ORLANDO, FL 32819	<input type="checkbox"/> Delete 7512 Dr. Phillips Blvd. Suite #50, PMB 270 Orlando, FL 32819	TITLE NAME STREET ADDRESS CITY-ST-ZIP	400055989624 06/10/05--01002--020 **150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		
Date			Daytime Phone #		

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Division of Corporation
March 31, 2005


To Whom It May Concern:

This letter is to explain that I didn't receive the corporation file mail or the rejection letter from the states for Aspen Light Consulting Inc for 2004 due to an address change. We did send in the file report and the \$150 is deposit by the state on 10/25/04(01075 016 \$150).

I spoke to Miss Eula in the Division of Corporation today. She was very helpful to guide me the reinstatement process. Attached is the form for reinstatement with the updated address and \$150 check for 2005.

Thank you very much for all you help!

Cindy Xin Zhao
Aspen Light Consulting, Inc


3/31/05