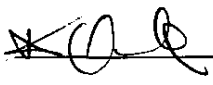



PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

ATX1

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS		FILED 04 NOV 16 PM 1:53 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # P03000037291					
1. Corporation Name FAST CONNECT INC					
2. Principal Office Address 9401 W COLONIAL DR Suite, Apt. #, etc.		3. Mailing Office Address 5250 INTERNATIONAL DR Suite, Apt. #, etc. 720			
City & State OCOE FL		City & State ORLANDO FL			
Zip 34751	Country ORANGE	Zip 32819	Country Orange	4. Date Incorporated or Qualified To Do Business in Florida	
5. FEI Number 47-0915706				Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>				\$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name OMAR ZAID QASEM					
Street Address (P.O. Box Number is Not Acceptable) 9401 W COLONIAL DR					
Suite, Apt. #, Etc.					
City OCOE			State FL	Zip Code 34751	
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.					
Signature of Registered Agent  Date 11/3/2004					
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 / Street / Zip	
CEO	OMAR ZAID QASEM	9401 W COLONIAL DR		OCOE, FL. 34751	
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.					
SIGNATURE: 				11/3/2004	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #	

TO WHOM IT MAY CONCERN:

I OMAR QASEM THE OWNER OF "FAST CONNECT INC."& CELL SOLUTIONS INC. DID NOT RECEIVE THE UNIFORM BUSINESS REPORT FOR MY BUSINESS. THIS IS THE REASON FOR ME NOT PAYING MY BILL TO THIS ORGANIZATION ON TIME. BUT TO DAY I'M WILLING AND READY TO HANDLE MY OUT STANDING BALANCE WITH YOUR COMPANY, SO THAT I CAN REINSTATE MY CORPORATION AND THEN RESTORE MY GOOD FAITH WITH THE DIVISION OF CORPORATIONS.

IF THERE ARE ANY QUESTIONS OR CONCERNS PLEASE FEEL FREE TO CALL.

THANK YOU

OMAR QASEM