(1)

H00000009091 0 PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION REINSTATEMENT** 97-00

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
00 FEB 29 PM 1:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**REINSTATEMENT** 97-00

DOCUMENT # P93000022103

1. Corporation Name

MELACO ENERGY CORPORATION

| 2. Principal Office Address | 3. Mailing Office Address |
|---|---|
| 4941 SW 74 CT. | SAME |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| MIAMI, FLORIDA | |
| City & State | City & State |
| 33155-4412 | |
| Zip / Country: USA | Zip / Country |

4. Date Incorporated or Qualified To Do Business in Florida: MARCH 24, 1993

5. FEI Number: 65-0397350 — Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED [X] — $8.75 Additional Fee required for a Certificate of Status

SP

7. Name and Address of Current Registered Agent

Name: PATRICK J. REBULL, PE

Street Address (P.O. Box Number is Not Acceptable): 4941 SW 74 CT.

Suite, Apt. #, Etc.:

City: MIAMI | State: FL | Zip Code: 33155-4412

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: [signature] REGISTERED AGENT MUST SIGN — Date: 2-29-00

CR2EM81 (8-98)

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 |
|---|---|---|---|
| P | LEONARD J. GREENFIELD<br>6721 SW 69 TERR.<br>MIAMI, FL. 33143 | | |
| V/P | H. GRAHAM MOZEALOUS<br>3731 SW 124TH CT.<br>MIAMI, FL. 33175 | | |
| S | PATRICK J. REBULL, PE<br>4941 SW 74 CT.<br>MIAMI, FL. 33155-4412 | | |
| D | CHARLES E. SERIG<br>14825 SW 147 COURT<br>MIAMI, FL. 33196 | | |
| | | | |
| | | | |

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: [signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date: 2-29-00 — Daytime Phone #

P93000022103

# Florida Department of State

## Division of Corporations

### Public Access System

Katherine Harris, Secretary of State

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To:
Division of Corporations
Fax Number : (850)922-4004

From:
Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305)599-0839
Fax Number : (305)716-0346

# CORPORATION REINSTATEMENT

## MELACO ENERGY CROPORATION

| | |
|---|---|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | $1,200.00 |