

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>99300003495</u>		FILED 28 AUG 10 PM 1:45 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1. Corporation Name Entertainment Environments Group, Inc.			
Principal Place of Business 1156 Glenneyre Street Laguna Beach, CA 92651		Mailing Address	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.			
2. New Principal Office Address, If Applicable 1156 Glenneyre St. Suite, Apt. #, etc.		3. New Mailing Office Address, If Applicable 1156 Glenneyre St. Suite, Apt. #, etc.	
City & State Laguna Beach, CA		City & State Laguna Beach, CA	
Zip 92651	Country USA	Zip 92651	Country USA
4. Date Incorporated or Qualified To Do Business in Florida 7/14/95		5. FEI Number 59-3325429	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>		Applied For <input type="checkbox"/> Not Applicable	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
Pres.	Jeffrey J. Keaffaber	1156 Glenneyre St.	Laguna Beach, CA 92651
8. Name and Address of Current Registered Agent Jeffrey J. Keaffaber 118 East Jefferson Street Orlando, FL 32801		9. Name and Address of New Registered Agent Name Wade F. Johnson, Jr. Street Address (P.O. Box Number is Not Acceptable) 118 East Jefferson Street Suite, Apt. #, Etc. City Orlando State FL Zip Code 32801	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent <i>Wade F. Johnson, Jr.</i> Date 8/7/98 REGISTERED AGENT MUST SIGN			
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes <input type="checkbox"/> No <input type="checkbox"/> (See other side for information on intangible tax.)			
12. 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: <i>Wade F. Johnson, Jr.</i> SIGNATURE ENCLOSED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		President 8/6/98 Date 949-494-7065 Daytime Phone #	

CR2E040 (1/96)