
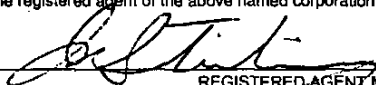
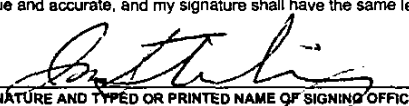


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	FILED 05 DEC -7 AM 2:21 SECRETARY OF STATE TALLAHASSEE, FLORIDA 900061992949 12/07/05--01042--007 **458.75 CR2E081 (8/05)	
DOCUMENT # R96000035689				
1. Corporation Name <p style="text-align: center;">Tidalwave Holdings Inc.</p>				
2. Principal Office Address 639 Cleveland Street Suite, Apt. #, etc. Suite 340 City & State Clearwater Florida Zip Country 33755 Pinellas		3. Mailing Office Address 639 Cleveland Street Suite, Apt. #, etc. Suite 340 City & State Clearwater Florida Zip Country 33755 Pinellas		
		4. Date incorporated or Qualified To Do Business in Florida 04/23/1996 5. FEI Number 650693777 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 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 J. R. Stirling Street Address (P.O. Box Number is Not Acceptable) 639 Cleveland Street Suite, Apt. #, Etc. Suite 340 City Clearwater State FL Zip Code 33755				
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 12/1/2005 <div style="text-align: center;">REGISTERED AGENT MUST SIGN</div>				
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.D	L. Edward Bache	1437 Willowbrook Drive	Palm Harbor, FL 34683	
S.D	J. R. Stirling	639 Cleveland Street Suite 340	Clearwater, FL 33755	
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:  SECRETARY 12/1/05 727-447-1459 <div style="display: flex; justify-content: space-between;">SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTORDateDaytime Phone #</div>				

00. Williams DEC - 7 2005

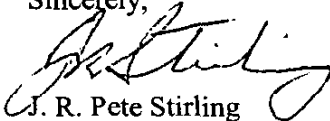
AMERICAN FIRST FINANCIAL, INC.
INVESTMENT MORTGAGE BANKERS

November 30, 2005

To Whom It May Concern:

Enclosed please find a completed reinstatement form for Tidalwave Holdings, Inc. along with the required fee. The 2003 notice for this corporation was never received. We are therefore requesting that any additional fees or penalties be waived.

Sincerely,


J. R. Pete Stirling
Secretary

639 CLEVELAND STREET, SUITE 340, CLEARWATER, FLORIDA 33755

(727) 447 - 1459 ● ● (727) 442 - 6379 FAX