

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED  
AND  
FILED

02 MAR 13 AM 11:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1002

|                                                                                     |                       |                                                                                                                             |                       |
|-------------------------------------------------------------------------------------|-----------------------|-----------------------------------------------------------------------------------------------------------------------------|-----------------------|
| <b>CORPORATION<br/>REINSTATEMENT</b>                                                |                       | <b>FLORIDA DEPARTMENT OF STATE</b><br><b>Katherine Hams</b><br><b>Secretary of State</b><br><b>DIVISION OF CORPORATIONS</b> |                       |
| <b>DOCUMENT #</b> P98000101832                                                      |                       |                                                                                                                             |                       |
| <b>1. Corporation Name</b><br>GOLF SPECTRUM, INC                                    |                       |                                                                                                                             |                       |
| <b>2. Principal Office Address</b><br>1321 Apollo Beach Blvd<br>Suite, Apt. #, etc. |                       | <b>3. Mailing Office Address</b><br>1321 Apollo Beach Blvd<br>Suite, Apt. #, etc.                                           |                       |
| <b>City &amp; State</b><br>Apollo Beach, FL                                         |                       | <b>City &amp; State</b><br>Apollo Beach, FL                                                                                 |                       |
| <b>Zip</b><br>33572                                                                 | <b>Country</b><br>USA | <b>Zip</b><br>33572                                                                                                         | <b>Country</b><br>USA |

|                                                                                                                             |                                                        |
|-----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|
| <b>4. Date Incorporated or Qualified To Do Business in Florida</b><br>1-01-99                                               |                                                        |
| <b>5. FEI Number</b><br>59-3545951                                                                                          | Applied For<br><input type="checkbox"/> Not Applicable |
| <b>6. CERTIFICATE OF STATUS DESIRED</b> <input checked="" type="checkbox"/> \$8.75 Additional Fee for Certificate of Status |                                                        |

|                                                                                     |                                                               |
|-------------------------------------------------------------------------------------|---------------------------------------------------------------|
| <b>7. Name and Address of Current Registered Agent</b>                              |                                                               |
| <b>Name</b><br>DEAN REFRAM                                                          | 500005257245--5<br>04/12/02 81848--029<br>***308.75 ***308.75 |
| <b>Street Address (P.O. Box Number is Not Acceptable)</b><br>1321 Apollo Beach Blvd |                                                               |
| <b>Suite, Apt. #, Etc.</b>                                                          |                                                               |
| <b>City</b><br>Apollo Beach                                                         | <b>State</b><br>FL                                            |
| <b>Zip Code</b><br>33572                                                            |                                                               |

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, VS.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date 4-5-02

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     |
|--------|-----------------------------------|------------------------------------------------|------------------------|
| PTD    | REFRAM, DEAN J                    | 1321 Apollo Beach Blvd                         | Apollo Beach, FL 33572 |
|        |                                   |                                                |                        |
|        |                                   |                                                |                        |
|        |                                   |                                                |                        |
|        |                                   |                                                |                        |
|        |                                   |                                                |                        |
|        |                                   |                                                |                        |

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:

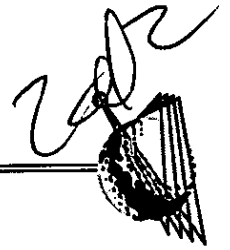
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

# GOLF SPECTRUM

*Verification & Renovation*



TO: FLORIDA DEPARTMENT OF STATE

I DEAN Refram, President of Golf Spectrum am writing this letter to explain that for the year 2001 I did not receive our corporation annual report/uniform business form. My ex wife and officer and bookkeeper had an injunction against me and the physical address of our business. After the divorce I moved back into the home and office. I was told no report was ever sent. I Apologize for the delay. I am now the sole officer of the company.

Thank you

Dean Refram