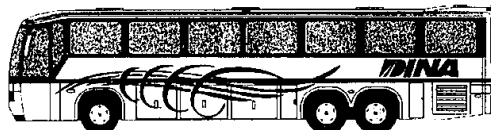


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P99000037037			
1. Corporation Name CLASSIC COACH & TOURS INC.			
2. Principal Office Address 1540 KURT ST.		3. Mailing Office Address P.O. Box 1714	
City & State EUSTIS FL		City & State MT. DORA FL	
Zip 32726		Zip 32756	
Country USA		Country USA	
4. Date Incorporated or Qualified To Do Business in Florida 5/01/99			
5. FEI Number 59-3334436			
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$6.75 Additional Fee required for a Certificate of Status			
7. Name and Address of Current Registered Agent			
Name CURTIS Singleton			
Street Address (P.O. Box Number is Not Acceptable) 1213 E. SECOND AVE			
Suite, Apt. #, Etc. 300004706053-5 -12/05/01--01041-030 ****308.75 ****308.75			
City MT. DORA		State FL	
		Zip Code 32757	
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 11/14/01	
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 / State / Zip
P.	CURTIS Singleton	1213 E 2ND AVE	MT. DORA, FL 32757
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 807.0401 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)(f), 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:		11/14/01 352-483-5100	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

Classic & Coach
& Tours, Inc.



P. O. Box 1714, Mount Dora, Florida 32756
(352) 383-1004

November 15, 2001

Department of State
Division of Corporations
P.O.Box 6327
Tallahassee, FL 32314

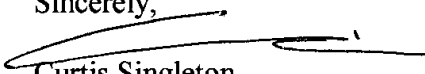
Re: Corporation Re-Instatement

To whom it may concern,

I have received no notices from the state of Florida concerning "Classic Coach & Tours, Inc." I am also requesting that the late fee be waived. Enclosed is a money order in the amount of \$308.75 as instructed by an Examiner from your office.

If you require any further information I can be reached at (352) 483-5100.

Sincerely,


Curtis Singleton
President-Classic Coach & Tours, Inc.

"Nobody Does It Better"