PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. SECRETARY OF STATE DIVISION OF CORPORATIONS FL'ORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State 02 APR -1 PM 4: 00 DIVISION OF CORPORATIONS **DOCUMENT#** 5 69731 1. Corporation Name Jasha Recordings, INC. 11720 Island Lates Lave BOCA RATON, FRANKA 33498 3. Mailing Office Address 11720 Island Lates Lone Suite, Apt. #, etc. Suite, Apt. #, etc. Date Incorporated or Qualified To Do Business in Florida 7/31/91 City & State City & State Applied For 5. FEI Number RATON GLASIAA 65-0318155 Not Applicable Country \$8.75 Additional Fee required CERTIFICATE OF STATUS DESIRED for a Certificate of Status U-S.A. 7. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable)

11720 ISland Lakes Lawe 800005291888 -04/18/02--01017--007 ****150.00 ****190.00 State Zip Code 33498 FL 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. Date x 3 26/02 Atexander Panajotou Signature of Registered A 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each City / State / Zip Titles Officers and/or Directors Atexander Panajotov 11720 Island Lakes Lave Boun Parton, Phonton 33498 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 filling 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 nd accurate, and my signature shall have the dame legal effect as if made under oath.

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Pres iden to on this application is true

NOTYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

3/26/02