

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

08 JAN 25 AM 10:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000016443

1. Corporation Name
SOUTH OBT CORP.

REINSTATEMENT

100116108711
01/25/08--01033--018 **1500.00
CR2E081 (12/07)

2. Principal Office Address - No P.O. Box #
2002 Papa John's Blvd.

3. Mailing Office Address
P.O. Box 99900

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Louisville, KY

City & State
Louisville, KY

Zip Country
40299 USA

Zip Country
40269 USA

4. Date Incorporated or Qualified
To Do Business in Florida 02/28/1994

5. FEI Number Applied For
593236496 Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
C T Corporation System
Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road
Suite, Apt. #, Etc.

City State Zip Code
Plantation FL 33324

The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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 Carol Record **Carol Record, Asst. Secy** Date **1/10/2008**
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/D	Charles W. Schnatter	2002 Papa John's Blvd.	Louisville, KY 40299
T/D	J. David Flanery	2002 Papa John's Blvd.	Louisville, KY 40299
S	Clara M. Passafiume	2002 Papa John's Blvd.	Louisville, KY 40299
AS	Lou H. Jones	2002 Papa John's Blvd.	Louisville, KY 40299
AS	Kenneth M. Cox	2002 Papa John's Blvd.	Louisville, KY 40299
AT	Claude M. Phenix	2002 Papa John's Blvd.	Louisville, KY 40299

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 contained in Chapter 119, 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: Kenneth M. Cox Kenneth M. Cox 1/23/08 502/261-4120
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #