

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

AND FILED

97 DEC 11 AM 9:54

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P96000069876**

1. Corporation Name
ABE'S ENTERPRISES, INC.

Principal Place of Business Mailing Address
6790 SARA SEA CIRCLE SARASOTA FL 34242



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable
7346 Regina Royale
 Suite, Apt. #, etc.

3. New Mailing Office Address, if Applicable
PO Box 3319
 Suite, Apt. #, etc.

4. Date Incorporated or Qualified To Do Business in Florida
08/21/1996

City & State
Sarasota FL
 Zip
34238 Country
USA

City & State
Sarasota FL
 Zip
34230 Country
USA

5. FEI Number
65-0700155
 Applied For
 Not Applicable

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

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PSTD	LINCOLN, PATRICK J	6790 SARA SEA CIRCLE 7346 Regina Royale Sarasota	SARASOTA FL 34242 SARASOTA FL 34238
			600002371336--9 -12/12/97--01117--016 ****165.00 ****165.00
			12/11

8. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

9. Name and Address of New Registered Agent

Name
PATRICK LINCOLN
 Street Address (P.O. Box Number is Not Acceptable)
7346 Regina Royale
 Suite, Apt. #, Etc.
 City
Sarasota State
FL Zip Code
34238

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent REGISTERED AGENT MUST SIGN

Date

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No

(See other side for information on Intangible tax.)

12. 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 #

CR2E040 (8/97)

ABE'S ENTERPRISES, INC.

7346 REGINA ROYALE

SARASOTA, FL 34238

November 6, 1997

Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Attn: Sean Toner

Dear Sean:

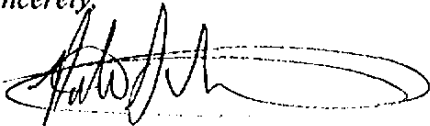
Enclosed please find the Application for Reinstatement. As instructed, I have attached a check in the amount of \$165.00. I was informed by Sharon Rannebarger of George V. Famiglio, Jr. & Associates that I needed to write you a letter explaining to you that I never received the original Annual Corporation Report form.

You will note that I have corrected the form.

Please correct and send a letter of correction to me.

Thank you for your immediate attention to the above matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Patrick J. Lincoln', written over a horizontal line.

Patrick J. Lincoln
President