PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

				6					
CORPORATION REINSTATEMENT		PARTMENT C etary of State of corporation	FILED 04 FEB 23 AM 10: 39						
DOCUMENT # P98000033035  1. Corporation Name  FES SOUTHEAST, INC.				SECRETARY OF STATE FALL ARASSFE FLORIDA					
<b>.</b> ;					PENSTALEMENT 99-07				
24 Principal Office Address 6821 SOUTHPOINT DR N	3. Mailing Office A		8000287 <b>4</b> 7688 02/13/0401044025 **908.75						
Suite, Apt. #, etc. SUITE 133	Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida  4-9-1998						
City & State  JACKSONVILLE FL  Zip Country	City & State			<b>5.</b> FEI Number Applied For 593505324 Not Applicable					
32216 USA	ZID	Country		CERTIFICAT	E OF STATU	S DESIRED	\$8.75 Additi for a Certi	ional Fee required	
	7. Name	and Address of C	urrent Register	ed Agent					
Name  LOUIS DAVID  Street Address (P.O. Box Number is Not Acceptable)  12627 SAN JOSE BLVD  Suite, Apt. #, Etc.  SUITE 306  City JACKSONVILLE  State Zip Code FL 32223									
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 PA  BEGISTERED AGENT MUST SIGN									
9. Names and Street Addresses of Each Officer and	d/or Director (Florida n	onprofit corporation	ns must list at lea	ast 3 directors)					
Titles Name of Officers and/or Directors	Name of Street Address of Ea Officers and/or Directors Officer and/or Direct				City / State / Zip				
STD CHRISTOPHER M. DREHER SUITE 133 JACKSONVILLE FL 32216							32216		
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				· · · · · · · · · · · · · · · · · · ·			<del></del>		
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.  Chustopher M. Ducher									
SIGNATURE: CHRISTOPHER M. DREHER 2-10-2004 904-296-7555 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #									



6821 Southpoint Drive North, Suite 133 Jacksonville, FL 32216-6109 Telephone 904-296-7555 Facsimile 904-296-5074

February 10, 2004

Florida Secretary of State Division of Corporations 409 East Gaines St. Tallahassee, FL 32399

Attn: Reinstatement Department

RE: Application for Reinstatement - FES Southeast, Inc.

Document # P9800003305

## To Whom It May Concern:

Enclosed for filing please find an application for Corporation Reinstatement for FES Southeast, Inc., as well as a check in the amount of \$900.00 which represents the total yearly fees to reinstate. I am requesting that the \$600.00 reinstatement fee be waived.

I recently accessed the Florida Secretary of State, Division of Corporation, website at <a href="www.sunbiz.org">www.sunbiz.org</a>. I was surprised to discover that the corporate status of my small business was considered 'inactive' by the State and has been administratively dissolved since 9/24/99. I placed a call to Division of Corporation and spoke with Cathy in the Reinstatement Department who explained to me that the administrative dissolution was due to non-filing of the annual report in 1999.

I know that I never received a notice from the Secretary of State that anything was due, owed, needed to be filed, or that the corporate status of my business was going to be administratively dissolved. This may be due to an incorrect mailing address. Your records show my suite number as 103 when the correct suite number is 133. I have listed the correct information on the enclosed Corporate Reinstatement.

Thank-you-for-your assistance. Please contact me at the telephone number listed above if you need any additional information to process my application.

Sincerely,

Christopher M. Dreher

C.M. Dreher

President

Enclosure