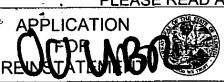
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

FILEÛ
SECRETARY OF STALE
 JIVISION OF CORPORATIONS



DOCUMENT # P9900037039 1. Corporation Name				00 NOV 22 PM 12: 34		
Principal Place of Business	Mailing Address		_			
6755 37TH ST. VERO BEACH FL 32966	6755 37TH ST. VERO BEACH FL 3:	6755 37TH ST. VERO BEACH FL 32968				
If above addresses are incorrect in any w	03-20-60 90107 634 \$150-00					
New Principal Office Address, If Applica		New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida - 04/19/1999		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. FEI Number Applied For		
City & State	City & State	City & State		65-0920106 Not Applicable		
Zip Country	Zip	Country	CERTIFICATE		litional Fee required rtificate of Status	
Names and Street Addresses of Each C	Officer and/or Director (Florida n	onprofit corporations must list at le	east 3 directors)			
Name of Officers and/or Directors		Street Address of Eac Officer and/or Director				
Pres AxelT Pet	erson Jr	7555 374 St		Vero Beach, F	= 32966	
)		
			phi	NS .		
8. Name and Address o	of Current Registered Agent	N	9. Name and A	ddress of New Registered Agent		
CRAMER, CHARLES W 1420 EDGEWATER DR. ORLANDO FL 32804		Street Address 1 4 2 2 Suite, Apt. #, E	Suite, Apt. #, Etc.			
_101, being appointed the registered agen	t of the above named corneration	City Vero T	Sea L		5510	
Signature of Registered Agent	REGISTERED AGENT	HAWIRED	- Industrial of Occil	Date 10/16/20	600	
11. I certify that I am an officer or director of	<u> </u>		s provided for in cha	apter 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.

Axel T Peterson Groves, Inc. 6755 37th Street Vero Beach, FL 32966

November 16, 2000

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

Dear Mr. Dunlap:

In accordance with your letter dated October 26, 2000 (copy enclosed) we never received your the correspondence you sent in March.

Also enclosed is our application.

Thank your for your consideration in this matter.

Respectfully submitted,

Axel T. Peterson, Jr.

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