2004 FOR PROFIT CORPORATION REINSTATEMENT

3003 62MD AVENUE EAST BRADENTON, R. 34203 3003 62MD AVENUE EAST Suite. Apr. 4, etc. 3004 Avenue earth address of Current Registered Agent 4 EPL Number 89 PH 2 P 2	1
Suite. Apt. 4, etc. Suite. Ap	E DA
City & State Country S. Certificate of Status Desired S. Certificate of Status Desired S. Seef Require For Require Street Address of New Registered Agent Name CHERRY, JOSEPH R 3003 62ND AVENUE CAST BRADENTON, FL 34203 City FL City FL Zip Cod City FL Now, Number is Not Acceptable) Signature of registered agent, or both, in the State of Florida, 1 am furnising with, the obligations of recision are of Place of the principle of Agent adjusted registered agent, or both, in the State of Florida, 1 am furnising with, the obligations of recision are of Place of Agent adjusted agent, or both, in the State of Florida, 1 am furnising with, the obligations of Agent adjusted registered agent, or both, in the State of Florida, 1 am furnising with, the obligations of Agent adjusted registered agent, or both, in the State of Florida, 1 am furnising with, and furnish with the obligations of Agent adjusted registered agent, or both, in the State of Florida, 1 am furnish with, and furnish with the obligation of Agent adjusted agent, or both, in the State of Florida, 1 am furnish with, and furnish with, and furnish with, and furnish with, and an adjusted agent, or both, in the State of Florida, 1 am furnish with, and an adjusted agent, or both, in the State of Florida, 1 am furnish with, and an adjusted agent, and an	
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S. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zip Cod 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, I am familiar with, the obligations—et-equistered agent. SIGNATURE STORYCE, typedox printed name of Rightered agent	lied For Applicable
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8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, I am familiar with, the obligatione-of-registered agent. SIGNATUBE SIGNATUBE SOUTHER, Lyoped or prized nome of rightered agent up total flapolicable. FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00 In accordance with s. 607, 193(2)(b), corporation did not receive the prior of the state of Florida, I am familiar with, the obligatione-of-registered agent up total flapolicable. FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00 In accordance with s. 607, 193(2)(b), corporation did not receive the prior of the	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the irridicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or changed, or on an attackment with an address, with all other like empowered. SIGNATURE: SIGNATURE: SIGNATURE:	or director