

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

~~APPLICATION~~
~~FOR~~
~~REINSTATEMENT~~

FLORIDA DEPARTMENT OF STATE
Kathleen Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 436663

1. Corporation Name

AL ASH REALTY, INC.

Principal Place of Business

5316 TROUBLECREEK RD.
NEW PORT RICHEY FL 34652

Mailing Address

5316 TROUBLECREEK RD.
NEW PORT RICHEY FL 34652

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 09/21/1973	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 59-1577987	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	-6- CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$9.75 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)			
Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
V	UZZLE, SANDRA S.	5316 THOUBLE CREEK RD	NEW PORT RICHEY FL
P	UZZLE, STEVE R.	5316 THOUBLE CREEK RD	NEW PORT RICHEY FL
ST	KARAY, BEVA S.	5719 LAFAYETTE STREET	NEW PORT RICHEY FL
			***150.00 ***150.00
			300004733253--8 12/19/01 01065-009 ***150.00 ***150.00

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
UZZLE, STEVE R. 5316 THOUBLE CREEK RD NEW PORT RICHEY FL 34653		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code FL	

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 _____ Date 10/18/01
REGISTERED AGENT MUST SIGN

11. 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: Steve R. Uzzle Pres _____ Date 11/13/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone # 737-849-0000

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AL ASH REALTY, INC.

5316 Trouble Creek Rd
New Port Richey
Florida, 34652
727-849-0000

October 18, 2001

To Whom it may concern,

I recently received notice from you that I failed to renew corporation , document # 436663 under the name of Al Ash Realty, Inc.

I have not received renewal notification . Please find check in the amount of \$150.00 and form application for reinstatement.

With personal regard,



Steve R. Uzzle
Pres./Al Ash Realty, Inc.