## 1.

## 2006 FOR PROFIT CORPORATION REINSTATEMENT

142

REINSTATEMENT									
DOCUI 1. Entity Nam GEORGIA				SEC 12.1 06 00T 30		25			
Principal Place of Business		Mailing Address	Mailing Address			m v a · ra \$1 (	7 <i>70.0</i> 56	_	<i>(</i> '-
4107 COLBEN BOULEVARD EVANS, GA 30809		4107 COLBEN BOULE EVANS, GA 30809	4107 COLBEN BOULEVARD EVANS, GA 30809		EMS	aien			Ψ.
						1118   1111   1611   1811   161			
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	, ,		10122006	REIN-P	CR2E098	·	
City & State		City & State	City & State		4. FEI Number 01-0666			<b>→</b>	plied For t Applicable
Zip	Country	Zip	Country		5. Certificate of Status Desired   \$8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent									
CTEDUEN	C MARLITANA D		Name						
1504 67TH	S, WILLIAM R I ST CT. E 'ŌÑ, FĹ 34208	Street	Street Address (P.O. Box Number is Not Acceptable)						
	,								
			City				FL	Zip Code	€
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, and accept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  [NOTE: Registered Agent signature required when reinstating]  DATE									
	E NOWIII FEE IS \$750.00 mary 1, 2007, Fee will be \$90		TE. Roylacor of Agent an	Practice 1 ad Cit	and temperatury)		DATE		
10.	OFFICERS A	AND DIRECTORS	11.	_	ADDITIONS/0	CHANGES TO OFF	ICERS AND D	IRECTORS	3 IN 11
TITLE	VST	☐ Delete	TITLE				E	Change	☐ Addition
NAME STREET ADDRESS	STEPHENS, WILLIAM R	NF 40	NAME						
CITY-ST-ZIP	7820 PROFESSIONAL PLAC TAMPA, FL 33637	/C #0	STREET ADDRESS	'					
TITLE	D	☐ Detete	TITLE	+				Change	Addition
NAME	PLAYER, RICHARD A		NAME		·	2020202	~~~		
STREET ADDRESS CITY-ST-ZIP	3350 GALES ROAD APPLING, GA 30802	,	STREET ADDRESS CITY-ST-ZIP	•	10/30	00081: !/050104	<i>⊐••••</i>	**350	חח ו
TITLE	D	Delete	TITLE		20,00		-	Change	Addition
NAME	TAYLOR, TERRY L	CEI DOICIC	NAME					_ change	
STREET ADDRESS	882 S. ST. ROAD 168		STREET ADDRESS	;					
CITY-ST-ZIP	LUBBOCK, TX 79407		CITY-ST-ZIP					7 0	
TITLE NAME		☐ Delete	TITLE NAME				L	Change	☐ Addition
STREET ADDRESS CITY-\$1-ZIP			STREET ADDRESS CITY-ST-ZIP						
TITLE		☐ Delete	TITLE				[	Change	Addition
NAME			NAME	1					
STREET AOORESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	·					
TITLE		☐ Delete	TITLE	+			ľ	Change	Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated 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 or director 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

19/27/06 706 364 3162

October 27 2006

To:

**Division of Corporations** 

PO Box 6327

Tallahassee FL 32341

From: MIT, INC.

4107 Colben Blvd Evans GA 30809

## To Whom It May Concern:

MIT has not received any documentation concerning our registration in Florida, neither here nor by our rep Roger Stephens. Please allow for our penalty fees to be waived and MIT to be reinstated in Florida. Once again I apologize for this, had we received the information we would have gladly paid it. Thank you

Sincerely,

Richard A Player

CEO/ President