PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Katherine Harris **FOR** Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS DOCUMENT # GO3792 99 FEB 15 AM 9: 30 Tulbid & Mille, Inc SECHEMON OF STATE TRUMUSSEE, PLOBIOA Principal Place of Busine ٠ ( REINSTATEMENT 18-99 Principal Office Address, If Applicable iquors Name of Officers and/or Directors Officer and or Director Officer and or Director (Do NOT Use Post Office Box Numbers) Title(s) FIANK J. DIANNA 1634 Glenwood Rd Yuler 7/19 32097

Mary Horgan 1534 Glenwood Rd Yuler 7/19-32097 Value 7/1- 32097 ejmagerenses---02719799--01078--013 \*\*\*\*908,75 \*\*\*\*808.75 8. Name and Address of Current Registered Agent me and Address of New Registered Agent 10. I, being appointed the registered agent of the above named corporation, and familiar with an Signature of Registered Agent REGISTERED AGENT MUST SIGN This corporation owes the current year Intangible Personal Property Tax due June 30. 12. 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 Many Horgan Sec/Treas 1/27/99 12999

SIGNATURE AND TYPE DEPRINTED NAME OF SIGNING OFFICER OFF DIRECTOR