PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	05 APR 29 AM 8: 40
DOCUMENT # 4204 1. Corporation Name Olde South	Trading Constant	SEGNE IARY OF STATE TALLAHASSEE, FLORIDA
		300054243763 05/11/0501012009 **1508.75
2. Principal Office Address 10800 Fla. Ga. Hiway	3. Mailing Office Address	
Suite, Apt. #, etc.	5 AMG Suite, Apt. #, etc.	ACINO IATEMENT 96-05
Suite 1861		4. Date Incorporated or Qualified To Do Business in Florida
City & State	City & State	5. FEI Number Applied For
Havana Fl		592610591 Not Applicable
32333 USA	Zip . Country	6. CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent		
Name William C. Beckham Tr		
Street Address (P.O. 30x Number is Not Acceptable) 10800 /-(Orida Georgia Highway		
Suite, Ap. #, Etc. /861		
City Havana		State Zip Code FL 3233
8. I, being appointed the registered agent of the above named corporation, an familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.		
Signature of Registered Agent Date 4/29/01		
9. Names and Street Addresses of Each Officer and/or Director (Fiorida nonprofit corporations must list at least 3 directors)		
Titles Name of Officers and/or Directors		or City / State / Zip
P.O William C. B	Backbant 10800 Fla.	14 avana El 32333
Vip William C Beckham III 10 500 Fla Ga. Havana Fl 32333		
D Margaret B. Be	ckham 10800 1-19	Sa. Havana F/ 32333
10. 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Divine Phone *		
Congram April 2 o Sully		

april 29, 2005

Dillean C. Bellem In did not receive my 1996 annual report for Olde South Trading to be Decument # 420404

> MCBedlings ar President