


# 2005 FOR PROFIT CORPORATION REINSTATEMENT

*Page 1 of 2*

|  |  |   |
|--|--|---|
| DOCUMENT # K63372                                |  |  |
| 1. Entity Name<br>HARPER & HARPER LAW FIRM, P.A. |  |   |

FILED  
05 DEC 23 AM 11:14

|  |   |
|--|---|
| Principal Place of Business<br>325 W PARK AVENUE<br>TALLAHASSEE, FL 32301 US | Mailing Address<br>PO BOX 10132<br>TALLAHASSEE, FL 32302-2132 |
|--|---|

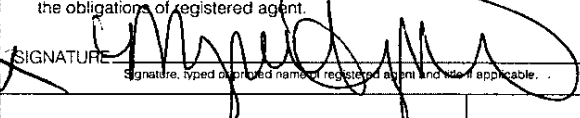


|                                |         |                     |         |
|--------------------------------|---------|---------------------|---------|
| 2. Principal Place of Business |         | 3. Mailing Address  |         |
| Suite, Apt. #, etc.            |         | Suite, Apt. #, etc. |         |
| City & State                   |         | City & State        |         |
| Zip                            | Country | Zip                 | Country |

|   |        |                                |
|---|--------|--------------------------------|
| 12192005  | REIN-P | CR2E098 (6/04)                 |
| 4. FEI Number<br>59-2925419                               |        | Applied For<br>Not Applicable  |
| 5. Certificate of Status Desired <input type="checkbox"/> |        | \$8.75 Additional Fee Required |

|  |  |
|--|--|
| 6. Name and Address of Current Registered Agent<br><br>HARPER, ROBERT AUGUSTUS, JR.<br>325 WEST PARK AVENUE<br>TALLAHASSEE, FL 32301 |  |
|--|--|

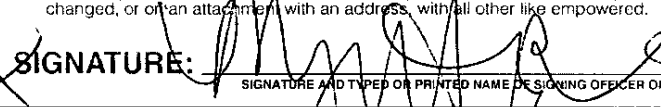
|  |             |
|--|-------------|
| 7. Name and Address of New Registered Agent        |             |
| Name   |             |
| Street Address (P.O. Box Number is Not Acceptable) |             |
| City   | FL Zip Code |

|   |      |
|---|------|
| 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   | DATE |

|  |  |
|--|--|
| FILE NOW!!! FEE IS \$150.00<br>After January 1, 2006, Fee will be \$300.00 | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
|--|--|

| 10. OFFICERS AND DIRECTORS                     |   |
|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PT<br>HARPER, ROBERT A JR<br>325 W PARK AVENUE<br>TALLAHASSEE, FL 32301 <input type="checkbox"/> Delete         |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | ST<br>SPIERS, ANGELA D<br>325 W PARK AVENUE<br>TALLAHASSEE, FL 32301 <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |   |
|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | Harper, Robert A. III<br>325 W Park Ave<br>Tallahassee, FL 32301 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | 900062520939<br>12/30/05--01067--012 **758.70 <input type="checkbox"/> Change <input type="checkbox"/> Addition                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | B. 12/27/05 <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | REINSTATEMENT <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |

|   |                       |
|---|-----------------------|
| 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 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. |                       |
| SIGNATURE:    | 12-19-05 850-224-5900 |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  | Date Daytime Phone #  |

*P77C202*

HARPER & HARPER  
LAW FIRM, P.A.

|                                 |  |                                  |
|---------------------------------|--|----------------------------------|
| State of Florida                | 850/224-5900   | Board Certified                  |
| State of Georgia                | fax 850/224-9800   | Appellate Criminal Law           |
| 325 West Park Avenue            | 1-800-64-L-A-W-Y-E-R   | Criminal Law                     |
| Tallahassee, Florida 32301-1413 | <a href="http://www.harperlawnfirm.com">www.harperlawnfirm.com</a> | Appellate Practice               |
|                                 |  | Major & Complex Civil Litigation |

- *Robert Augustus Harper*
- *Robert Augustus Harper, III*
- *Jonathan Mitchell Kester*

22 December 2005

Florida Department of Corporations  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Attention: Tyrone Scott

To whom it may concern:

Robert Augustus Harper, III is to be added as the Secretary/Treasurer of Harper & Harper Law Firm. Robert Augustus Harper, Jr. is to remain President. Former secretary, Angela Spiers, is to be deleted appropriately. Best wishes.

Robert Augustus Harper, Jr. - President  
Robert Augustus Harper, III - Secretary/Treasurer

Angela Spiers - DELETED

Sincerely,

  
Robert A. Harper