## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

COMPANY  REINSTATEMENT  LIMITED LIABILITY  FLORIDA DEPARTMENT OF STATE  Secretary of State  DIVISION OF CORPORATIONS					FILE() 04 JUL -2 PM 4: 43			
KEINSIA	IEMENT	Division o	r corporations .					
DOCUMENT # L00000014417					LAitin	JE FLORIDA	4	
1. Limited Liability BG & I	Company's Name EA, LLC					,	ilen .	
							944 -	
				o7취	2003 1/0401	1912845 1062002	\$210.00\square	
2. Principal Office Address		3. Mailing Office Address					117	
3030 Northeast 26th St.		Same		4. State/Country of Formation				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Florida, USA				
				5. Date Organized or Qualified To Do Business in Find VEMBER 14, 2000				
City & State Fort Lauderdale, FL 33308		City & State		6. FEI Number	өг	-	Applied For	
Zip Country		Zip	Country		65-1103929 Not Applicable			
33308	USA	ا منه ا	Country	7. CERTIFICATI	E OF STATUS D		ditional Fee required artificate of Status	
		8. Name an	d Address of Current Regis	tered Agent				
Nam	C. Christian Sa	utter. Esa.		·				
Stree	et Address (P.O. Box Number is No							
1	2850 North Andrews Avenue							
Suite	e, Apt. #, Etc.	·						
City	City				State 2	Zip Code		
Fort Lauderdale					FL	33311		
9. I, being appoint	ted the registered agent of the abov	re named timited liability	/ company, am familiar with ar	nd accept the obligat	tions of Chapt	er 608, F.S.	970	
Signature of	// (/k/L////	<del>/</del>				June 30, 2	2004	
Registered Agent '_	RE	GISTERED AGENT MU	JST SIGN		Date	June 30, 2	1004	
10. Names and S	Street Addresses of Managing Mem	bers/Managers						
Titles	Name of Managing Members/Managers		Street Address of Each Managing Member/Manager			City / State / Zip		
O/MGR Bev	verly Gail Commer	303	3030 Northeast 26th Street		Fort Lauderdale, FL 33308			
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					<u> </u>	- 100 P	3	
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	200							
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			*MO Y	oncer	PCCi	veac*		
filing this reins all fees owed i as if made un	am managing member/manager of statement application the reason for by the limited liability company have ider oath.	dissolution has been ell been paid. The informa	iminated, the limited liability co ation indicated on this applicati	mpany name satisfle on is true and accur	es the requiren ate, and my sig	nents of section 608,40 gnature shall have the	06, F.S., and that same legal effect	
Signature of Managing Member	/Manager/ Swully	gael 4	warmene 6	/30/2004	Daytime Phon	<sub>e</sub> #_ <u>954<b>–</b>568</u> –2	122	
Typed or printed na	ame of signing Managing Member/	Manager <u>Bever</u>	ly Gail Commer.	Mgr.				

## SEILER, SAUTTER, ZADEN & RIMES

ATTORNEYS AND COUNSELORS AT LAW 2850 North Andrews Avenue Fort Lauderdale, Florida 33311

C. Christian Sautter, P.A.\* John P. Seiler, Esquire Richard J. Zaden, Esquire M. Tamara Rimes, Esquire Telephone (954) 568-2122 Telecopier (954) 568-2152 E-mail: csautter@seisau.net

Of Counsel Thomas T. Coon, Jr., Esquire

\* Also admitted in Texas

June 30, 2004

Via FedEx

Florida Department of State Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

Re: BG & DJ, LLC and BG & EA, LLC, Florida limited liability companies

Dear Ladies and/or Gentlemen:

We have no record of having received any notice for filing of the annual reports. Therefore, we have enclosed a check payable to the Department of State, in the amount of \$210.00 (representing the annual fee of \$100.00 (\$50.00 annually) per each limited liability company and for the certificate of status fee of \$5.00 per entity), together with the revised Reinstatement Documents.

Please accept our payment in full as we did not receive any notices. Thank you for your consideration, cooperation and assistance in this matter.

Very truly yours,

SEILER, SAUTTER, ZADEN & RIMES

C. Christian Sautter, Esq.

Encls.

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