## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

DOCUMENT # L02000018428

Name and Mailing Address

DIVISION OF CORPORATIONS

7.003 NOV 1.2 DE

FILED 2003 NOV 12 PM 2: 15

DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

Date \_/0/23/03 Daytime Phone # 407-925 - 4092



2. New Mailing Address - 9775-A AIRPORT Blvd.			State/Country of Formation     FL		
ORLANDO, FL 32827			5. Date Organized or Qualified To Do Business in Florida 07/22/2002		
Principal Place of Business 1220 ATLANTA AVENUE	3. New Principal Place of Busine	6. FEI Num	6. FEI Number Applied For 3200 23075 Not Applicable		
ORLANDO FL 32806	City, State, Zip	7.	7. CERTIFICATE OF STATUS DESIRED S5.00 Additional Fee required for a Certificate of Status		
8. Name and Address of Current Registered Agent		Name and Address of New Registered Agent			
SMALL BUSINESS LEGAL CENTER, P.A. 425 WEST COLONIAL, SUITE 206 ORLANDO FL 32804		Name LEONARD LAMASTUS  Street Address (P.O. Box Number is Not Acceptable)  1220 A+LANTA AVE.  ORLANDO, FL 32806-3913  City FL Zip Code			
10. I, being appointed the gistiged a)jent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.  Signature of Registered Agent Date 11/10/03  REGISTERED AGENT MUST SIGN					
11. Names and Street Add ssas of Each Managing Member/Manager  Name of Managing Street Address of Each  Street Address of Each					
Title(s) Members/Managers		Managing Member/Manager		City / State / Zip	
PRES LEONARD LAMAS	TUS 1220 1	ATLANTA AVE	ORLANDO,	FL 32806	
V. PRES TERREII WALKER 2908		GREEN CASHLE Rd.	Burtonsvil	le, mo 20866	
TREAS Thomas PAIG	ε 2275 E.	55th Street	Cleveland,	OH 44103	
		8C 11/12	100246172 70301084006	238 **150:00	
		REMOTATE	MENT 2003		
12. I certify that I am managing member/manage filing this reinstatement application the reason all fees owed by the limited liability	for dissolution has been eliminated, the	limited liability company name satis	fies the requirements of section	on 608.406, F.S., and that	

ATURE REQUIRED

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Signature of