## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FII FD FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State 03 NOV 19 AM 8: 24 REINSTATEMENT DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSES. FLORIDA DOCUMENT # L32018 1. Corporation Name BRANKOL ENTERPRISES INC. 2. Principal Office Address 3. Mailing Office Address 10918 PLEASANT OAK ROS. POST OFFICE BOX 26 042 Suite, Apt. #, etc. N/A Date Incorporated or Qualified To Do Business in Florida 11/20/1989 City & State City & State 5. FEJ Number Applied For Jacksonville , Fl JACKSONVILLE, FL 593004004 Not Applicable CERTIFICATE OF STATUS DESIRED \$\infty\$ 88.75 Additional Fee required for a Certificate of Status 32226 UNITED STATES United States 7. Name and Address of Current Registered Agent 000024852740 <del>11/19/03-01033-005 \*\*75</del>,75 WILLIE B. JACOBS 10918 PLEASANT OAK ROAD SOUTH Suite, Apt. #, Etc. d agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of GISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director Titles City / State / Zip JACKSONVILLE, FL 109/8-1 REASANT OAK PD. KANDICE J. JACOBS 32226 JACKSONVILLE, FL GLORIA D. JACOBS VP 32226 10918 Pleasant Oak Rd Jacksonville, FL 32226 CEO WILLIE B. JACOBS 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. ( 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. WILLIE B. JACOBS 11/14/03 904-751-1904 SIGNATURE: // GNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR