

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED AND FILED

1998 FEB -4 PM 1:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

600002427006--2
-02/10/98--01083--001
*****900.00 *****900.00

600002427006--2
-02/10/98--01083--002
*****8.75 *****8.75

APPLICATION FOR REINSTATEMENT
FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L99849
1. Corporation Name
Leabu Financial Enterprises, Inc.

Principal Place of Business Mailing Address
2167 Pinnacle Circle N. PO Box 1171
Palm Harbor, Florida 34684 Palm Harbor, Florida 34682

If above addresses are incorrect in any way, line through incorrect information and enter correction below.
2. New Principal Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip Country
3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc.
City & State
Zip Country

4. Date Incorporated or Qualified To Do Business in Florida 9/17/90
5. FEI Number 59-3027460 Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
1 P/T/S/ V/O	2 Julie Leabu Peluso	3 2167 Pinnacle Circle North #	4 Palm Harbor Florida 34684

REINSTATEMENT

97-98
2/11/98

8. Name and Address of Current Registered Agent
Julie Leabu Peluso
2167 Pinnacle Circle North
Palm Harbor, Florida 34684

9. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City State Zip Code
FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0503, F.S.
Signature of Registered Agent: *Julie Peluso* REGISTERED AGENT MUST SIGN Date: 1/31/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)

12. 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: *Julie Peluso* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Julie Leabu Peluso, President 1/31/98 Date 813-786-7355 Daytime Phone #

CR2E040 (1/98)