PLEASE READ A	LL INSTRUCTIONS	<u>BEFORE Ç</u>	OMPLET	ING THIS FORM	1.
APPLICATION FOR	FLORIDA DEPARTMENT OF STATE  Katherine Harris		ATOUR.		
REINSTATEMENT ***	Secretary of State		F.H.: A. (		
DOCUMENT # M70234			99 SEP 16 PH 1032		
DENNIS MYNATT & ASSOCIATES, INC.			SECRETARY OF STATE TALLAHASSEE, FLORIDA		
1800 Second Street Suite 775 Sarasota, FL 34236	Mailing Address		REINS	TATEMEN	PS-99
Fall over a librerses are incorrect in any way. line through incorrect information and enter cor 2. 14 & Principal Office Address, If Applicable 7934 N. Leewynn Way Safe Ay 1. 6 etc. Suite. April 6 etc. Suite. April 7934 N. Leewynn Way Suite. April 7934 N. Leewynn		Applicable	4. Date Incorporated or Qualified To Do Business in Florida 2/26/1998		
Oly & Cata	City & State		5. FEI Number	047728	Applied For Not Applicable
Sarasota, FL Courts	Sarasota, FI.  34240 USA		6 CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status		
7 Norway are 1 Street Addresses of Each Officer and of Name of Officers	Stre	et Address of Each	st 3 directors)		
andror Directors  3 (Do NC)		icer and/or Director se Post Office Box Nu	umbers)	4 Cny / :	State / Zip
PD Dennis L. Mynatt	7934 Leewy		Sarasota, FL	34240	
S Robert W. Gibson IV 627 St. Andrews Drive				Sarasota, FL	34243
			2000029942529 -09/22/9901098008 ***1358.75 ***1358.75		
8. Name and Address of Current R	egistered åpent		9. Name and A	Address of New Registere	1 Agent
Thomas M. Fitzeibbons			2.981		
			M. Fitzgibbons O Box Number is Not Acceptable) h Tuttle Avenue		
Sarasota, FL 34236	Suite Apt. #. Etc. Suite 4  City Sarasota  State Zip Code FL 34237				
10. It trong appointed the registered agent of the above	e named corporation, am familiar wi				1 34237/ · ·
Sign time of the product ( A Register of Agent	Thomas M.	Fitzgibbor	ns	Date 9/14/9	
<ol> <li>This corporation owes the continuous Intangible Personal Propert</li> </ol>		Yes [		(See other s on int	side for information angible tax.)
12 Fixed by that I am an officer or director or the receive this redistalement application, the reason for dissolvewed by the corporation have been paid and the natural to this application is true and accurate, and my sign	ation has been eliminated, the corpo ames of individuals listed on this for	rate name satisfies the do not qualify for a	he requirements n exemption und	of section 607.0401 or 617.	0401, F.S., that all fees
SIGNATURE: SIGNATURE AND TYPED OR PRINTED JAME OF SIGNING OFFICER OR DIRECTOR 9/15/99 94/377-3038 Date 9/15/99 94/377-3038 Daylimo Phone #					