PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT	DIV	DEPARTMENT OF ST. Secretary of State ISION OF CORPORATIONS	ĀTE	FILED OLUN-L PH L: L7 SECRETARY OF STATE.
DOCUMENT # P0000000526				SECRETARY OF STATE TALLAHASSEE, FLORIDA
1. Corporation Name				TENTENT OCOL
			2 	00035830002 0/0401105009 **1050.00
2. Principal Office Address 17488 Lebanca K	d. 174	3. Mailing Office Address 17488 Lebahon Rd.		The services and dispute sealest that the first health by all through
Suite, Apt. #, etc.	Suite, Apt. #			O D D D D D D D D D D D D D D D D D D D
				Decorporated or Qualified Business in Florida Ol, 2000
City & State Fant Muers FL	,	City & State 5. F		ımber Apolièd For
Fort Myers EC Zip Country 339/2 Lee	Zip	Country	6.	-0975584 Not Applicable
339/2 Lee	339	12 Le		CATE OF STATUS DESIRED 58.75 Additional Feetragified for a Certificate of Status
7. Name and Address of Current Registered Agent Name Dean E Moore 2003583002 Street Address (P.O. Box Number is Not Acceptable) 06/09/0401043006 **158.75 17488 Lebanon R.C. Suite, Apt. #, Etc.				
City FT Myers &				State Zip Code FL 339/2
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent Dean E Myore REGISTERED AGENT MUST SIGN				
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)				
Titles Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip
Pres. Dean E Moore		17488 Lebenon Rd.		PTMyers FL 33912
ViPres Gloria J Moore 17488 Lebanon			non Bol.	FTMyers FL 33912
Tres Dean E	Moore	17488 Labo	non Rd.	FT Myers FL 33912
See. Glorial	Moore	17488 Leb	anon Bd.	FT Myers F C 33912
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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. 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: Dean & Moore 4-3-04 823-5363				