


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

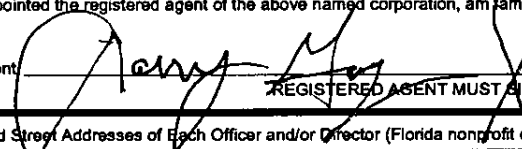
**FILED**  
**Mar 12, 2002 8:00 A.M.**  
**Secretary of State**

<b>CORPORATION REINSTATEMENT</b>				<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT #</b> P00000022932					
<b>1. Corporation Name</b>  Player Entertainment of Tampa, Inc.					
<b>2. Principal Office Address</b> 6822 N. 50 Street  Suite, Apt. #, etc.  City & State Tampa, FL  Zip 33624			<b>3. Mailing Office Address</b> P.O. Box 340135  Suite, Apt. #, etc.  City & State Tampa, FL  Zip 33694		
Country USA		Country USA			

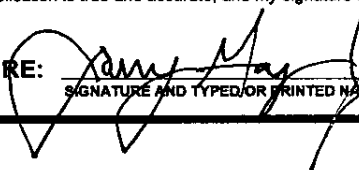
**REINSTATEMENT 01-02**

<b>4. Date Incorporated or Qualified To Do Business in Florida</b> 2/25/00	
<b>5. FEI Number</b> 59-3630482	<b>Applied For</b> Not Applicable
<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

<b>7. Name and Address of Current Registered Agent</b>		
Name Larry Gay, Jr.		
Street Address (P.O. Box Number is Not Acceptable) 15308 Carrollton Lane		
Suite, Apt. #, Etc.		
City Tampa	State FL	Zip Code 33624

<b>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.</b>	
Signature of Registered Agent 	Date 2-27-02
REGISTERED AGENT MUST SIGN	

<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b>			
<b>Titles</b>	<b>Name of Officers and/or Directors</b>	<b>Street Address of Each Officer and/or Director</b>	<b>City / State / Zip</b>
P/D	Larry Gay, Jr.	15308 Carrollton Lane	Tampa, FL 33624
VP/S/D	Tanya N. Gay	15308 Carrollton Lane	Tampa, FL 33624

<b>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.</b>			
<b>SIGNATURE:</b> 	Larry Gay, Jr., President	2/27/02	(813) 963-3400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #

CR2E081 (9/01)