## REINSTATEMENT 01-02

FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)		FILED		
DOCUMENT # P 00000046700			02 MAY -1 AM 9: 45	
Double B' Enterpr	ises Inc.	SECRETARY OF STATE TALLAHASSEE, FLORIDA		
The state of the s	A Company of the Comp	IALLAHASSEE	UF STATE FLORIDA	
DO NOT WRITE IN	I THIS SPACE		-7,	
2. Principal Place of Business Ave 3. M	9381 Zunior Are			
	Suite. Apt. #, etc.	DO NOT WRITE IN	THIS SPACE	
Apopla H	THPOPKY FI	4. FEI Number 52-2736540	Applied For Not Applicable	
30-703 USA 3	2703 CUSA	5. Certificate of Status Desired	Fee Required	
	Name	7. Name and Address of Current Regions Campbell	stered Agent	
DO NOT-WRI	Street Address	(P.O. Box Number is Not Acceptable)		
IN THIS SPAC	ZE City ./ -		7 in Code	
8. The above named entity submits this statement for the pu	PARTITION HOLD	op ko	FL 232703	
SIGNATURE _ SIC CALL	Douglas Campbell		26/02	
Signature, speed or printed needs or registered agent and tate of	applicable. (NOTE: Registered Agent signature requir	ed when reinstating)	DATE	
9. This corporation is eligible to satisfy its Intangible  Tax filling requirement and elects to do so.  (See criteria on back)	January 1: May 1 Fee is \$150.00 After May 1 Fee is \$150.00 After May 1 Fee is \$550.00 William Amended UBR is \$61 25 Kee	10. Election Campaign Financin Trust Fund Contribution	9 \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECT	The state of the s	A STATE COLUMN TO STATE OF THE	SARA DA PAGAMENTE PROPERTO DE LA CONTROL DE	
NAME CAMPBELL, DouglAS 12 STREET ADDRESS 9381 Junion Ave	NAME TO STREET APPOISS	75000 <b>055</b> 0		
CITY-ST-ZIP APOPKA F1. 32703	CITY-ST-ZIP		00G.****300.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE PIAME STREEFADURESS			
TITLE	CITY-ST-ZIRUGE TO			
NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESSY	DO NOT W	PITE :	
TITLE	CITY ST. INC.	IN THIS SP	ACMADES STANDED WAS TO WIND TO THE STANDARD STANDARD	
NAME STREET ADDRESS CITY-SY-ZIP	STREET ADDRESS			
TITLE	TILLE TO SERVICE THE SERVICE T			
STREET ADDRESS (	STIFEE TALORESSA SOTT ST-2PE			
TITLE	\$611P1-11647			
VAME STREET ADDRESS CITY-ST-ZIP	STREET ADDRESS CITY STRUM			
13. I hereby certify that the information supplied with this filling indicated on this report or supplemental report is true an of the corporation or the receiver or trustee empowered attachment with an address, wint all owner like empowere.	to accurate and that my signature shall have the			
SIGNATURE:	Loughes CAMPL	ell owner 4/20	6/02 407 505-11	
SIGNATURE AND TYPED OR PRINTED N	IAME OF SIGNING OFFICER OR DIRECTOR	Onte	Dayome Phone #	

Dept. of Corporations Reinstatement Section P.O. Box 6327 Tallahassee Fl. 32314-6327

Re: reinstatement of Double 'D' Enterprises Inc.

To Whom It May Concern:

The Uniform Business Report (UBR) for year 2001 was not received in the mail. Please find enclosed the appropriate form and check as required for both the current and past year.

Sincefely

Douglas Campbell

DOC, # P00000046700