

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

03 OCT -9 PM 1:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000046982

1. Corporation Name
TOP GUN CUSTOM PAINTING, INC.

600023666276
10/09/03--01045--020 **1050.00

2. Principal Office Address
736 Garden Court

3. Mailing Office Address
736 Garden Court

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Plantation, FL

City & State

Plantation, FL

Zip
33317

Country
USA

Zip
33317

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida 5/8/2000

5. FEI Number
86-1083047

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 01-03

7. Name and Address of Current Registered Agent

Name
Karl C. Ryder

Street Address (P.O. Box Number is Not Acceptable)
736 Garden Court

Suite, Apt. #, Etc.

City
Plantation

State
FL

Zip Code
33317

8. I, being appointed to registered agent of the above named corporation, am familiar with and accept the obligations of section

0.0505 or 1.050, F.S.

Signature of
Registered Agent

Karl C. Ryder

REGISTERED AGENT MUST SIGN

Date

10/2/03

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

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|--------|-----------------------------------|--|----------------------|
| PSD | Burrows, Whitmore R. Jr. | 1735 Dewey Street #202 | Hollywood, FL |
| VTD | Ryder, Karl C. | 736 Garden Court | Plantation, FL 33317 |
| | | | |
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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 60 or 1, F.S. I further certify that in filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 600.01 or 1.001, 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 600.01(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:

Whitmore R. Burrows, Jr.
PRESIDENT

10/2/03 (954) 378-1717

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

71 1015

CR2E081 (9/01)