PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<u> </u>		LEAS	SE READ	E COMP	LETING	i HIS FUR	KIVI.					
	CORPORATION REINSTATEMENT			FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS			E	FILED 04 JAN 15 PM 12:39				
DOCUMENT # P0000050771 1. Corporation Name Florida Executive Lending, Inc								SE TAI	CRETARY (LLAHASSEE	OF STATE I, FLORIDA		
2. Principal Office Address 2228 Lithia Center Lane						ss						
Suite, Apt. #, etc. Suite, A City & State City & S					ate			4. Date Incorporated or Qualified To Do Business in Florida				
Valrico ^{Zip} 33594	rico, FL Country United States			Zip	Country	(061582753 Not Applicable			nal Fee required		
Name Robert Volini											3 00 00	
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the ob- Signature of Registered Agent REGISTERED AGENT MUST SIGN									07.0505 or 617.050 Date			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)												
Titles	Officers and/or Directors			Street Address of Each Officer and/or Director			The statement of statement	City / State / Zip				
D	Robert Volini			505 S. Melville Ave.			Ta	Tampa FL 33606				
D	Kevin Kennelly			4413 Bay State Road			Pa	Palmetto, FL 34221				
D	Kathy Kennelly				4413 Bay State Road			Pa	Palmetto, FL 34221			

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 filling 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.

ゆしいい

OBENT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1 08 104 662-5363

Daytime Phone #

Date

CRZEUSI (1000



Pagerate

January 8, 2004 Re: Reinstatement

To Whom It May Concern:

As I was preparing to register my company online this morning, the system would not allow me to do it. I learned that the company's status was listed as inactive. After further investigation I learned that my 2003 registration and check had never been received by the state. I did in fact fill out the form and sent a check in March of 2003.

Enclosed is the reinstatement form plus the registration fee for both 2003 and 2004.

Thank you,

Robert Volini

President

Florida Executive Lending, Inc.