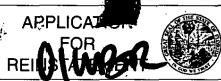
SE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

P00000070002

1. Corporation Name

LOUIS B. BILLS ENTERPRISES, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



01 OCT 18 AM 8:39

PALM BEACH GARDENS FL 33418	-810 7 LANE PALM BEACH GARDENS FL 33418					
τ '		ļ				
If above addresses are incorrect in any way, line thre	ough incorrect information and enter	correction balow	()u-10-	-01 9006	9 605 BIS	50.0
2. New Principal Office Address, If Applicable	New Mailing Office Address, If	Applicable _	4. Date Incorpo	prated or Qualified	(003	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	14 ME	To Do Busin	ess in Florida	07/20/2000	
Suite, Apt. #, etc.	Suite, Apr. #, etc.	į	5. FEI Number		Applied Fo	r
Prin BEAC & GARNES FL	Para Bons GARD	ms FL	65-1030	567	Not Applica	
ZiD3418 Country USA	Zip 33418 Countr	5'A	CERTIFICATE	OF STATUS DESIRED	\$8.75 Additional Fee req for a Certificate of Stat	
7. Names and Street Addresses of Each Officer and/	 		st 3 directors)			
Title(s) 1 Name of Officers and/or Directors		eet Address of Each ficer and/or Director		Ci	ty / State / Zip	
PARS Louis B. BILLS,	JR. Prim Bonne	GANE !	FL33418	,		
· · · · · · · · · · · · · · · · · · ·	The state of the s	, <u> </u>				
				_		
		 -			hiolog)
					<u> </u>	
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent			
BILLS, LOUIS B				s Not Acceptable)		CR2E040 (8/01)
810 LANE		810 8	Lan	<u> </u>		
PALM BEACH GARDENS FL 33418		Suite, Apt. #, Etc.				
· #		Rosen Brook	ON GARD	ans.	FL Zip Code FL ZZY/8	
10. I, being appointed the registered agent of the abo	ve named corporation, am familiar w	ith and accept the ob	ligations of Section	on 607.0505, F.S.	···	
Signature of Registered Agent	RE REQU	MRED		Date 10/15	101	_
	COIOTEMED AGENT MUST SIGN					\dashv
11. I certify that I am an officer or director or the receives this reinstatement application, the reason for dissourced by the corporation have been paid and the received by	olution has been eliminated, the corpo	orate name satisfies t	the requirements	of section 607.0401 or (617.0401, F.S., that all fees	

10/15/01 To: Die of Comp. Re: Encloid application Louis B. B. L. ENTERPRUES, Inc. according to a phase call to your office today, you sent me a letter on 4/4/01 because I hadn't listed the officer in my corp. There is one: Louis B. Bius, TR. 810 8th Lang Rosm Brancu GARDENS, FL In addition, the address should be changed to the stove. SBEET.