

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
03 AUG 13 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000087146

1. Corporation Name

Sanders Enterprises, Inc.

2. Principal Office Address

1100 Tucker Rd.

Suite, Apt. #, etc.

City & State

Riverview FL

Zip

33569

Country

USA

3. Mailing Office Address

1100 Tucker Rd.

Suite, Apt. #, etc.

City & State

Riverview FL

Zip

33569

Country

USA

4. Date Incorporated or Qualified To Do Business in Florida

01-13-00

5. FEI Number

59-3567886

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Charles J. Sanders

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

1100 TUCKER Rd.

000022247640

09/12/02--01029--010 **450 00

Suite, Apt. #, Etc.

City

Riverview

State

FL

Zip Code

33569

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.

Signature of Registered Agent

Charles J. Sanders

REGISTERED AGENT MUST SIGN

Date

01-28-03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PTD	Charles J. Sanders	11200 Tucker Rd.	Riverview, FL 33569

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.

SIGNATURE:

Charles J. Sanders
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

07-28-03

Daytime Phone #

813-610-6252

CR2E081 (10/02)

CHERYL CREASON, EA
ENROLLED AGENT

MEMBER:
NAEA
NSPA
FSATP

Abacus Business & Tax Services, Inc.

EIN: 59-3144957

105 SEVENTH AVE. N.E. • RUSKIN, FL 33570 • (813) 645-4000

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July 31, 2003

Department of State
Division of Corporations
PO Box 6327

Tallahassee, FL 32314

RE: Sanders Enterprises, Inc. -- Document No. P00000087146

Dear Sir or Madame:

Enclosed please find a check in the amount of \$450.00 (as corporate filing fees for the above referenced taxpayer).

Mr. Sanders, the President of Sanders Enterprises, Inc., states that he has not received his annual report or UBR filing from the State and would like to request a waiver of penalties in this regard.

Sincerely,



Cheryl Creason, EA.02-60867