


102

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>CORPORATION REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS <i>W050323447</i>		<b>FILED</b> 05 MAY 27 PM 12:37 SECRET TALLAHASSEE, FLORIDA	
<b>DOCUMENT #</b> <i>P 00000104092</i>					
<b>1. Corporation Name</b> SMOOTHIE EXPRESS INC					
<b>2. Principal Office Address</b> 11601 4TH STREET NO		<b>3. Mailing Office Address</b> SAME			
Suite, Apt. #, etc. 3701		Suite, Apt. #, etc. _____			
City & State ST PETERSBURG FL		City & State _____			
Zip 33716	Country US	Zip _____	Country _____		
		<b>4. Date Incorporated or Qualified To Do Business in Florida.</b> 11/07/09			
		<b>5. FEI Number:</b> <i>59-3680228</i>		Applied For Not Applicable	
		<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status			
<b>7. Name and Address of Current Registered Agent</b>					
Name JASON WOLGEMUTH					
Street Address (P.O. Box Number is Not Acceptable) 11601 4TH STREET NO					
Suite, Apt. #, Etc. 3701					
City ST PETERSBURG FL				State FL	Zip Code 33716
<b>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.</b>					
Signature of Registered Agent <i>[Signature]</i>		REGISTERED AGENT MUST SIGN		Date <i>4-21-05</i>	
<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b>					
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
DPS	JASON WOLGEMUTH	11601 4TH STREET NO #3701		ST PETERSBURG FL 33716	
<b>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.</b>					
SIGNATURE: <i>[Signature]</i> Jason Wolgemuth		Date 03/15/05		727-692-1663	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

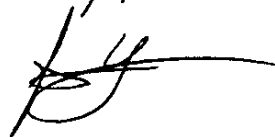
15010100101051

To Whom It May Concern,

2002

Please reinstate my Corporation due to the fact that I never received any forms or notices by mail or phone, in the year of 2002.

Sincerely,

A handwritten signature, possibly reading "JF", written in dark ink. The signature is stylized with a large, sweeping horizontal stroke extending to the right.