

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION **Ofc WBA** REINSTATEMENT

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

DOCUMENT # **P00000105126**

1. Corporation Name
SCG MARKETING, INC.

Principal Place of Business Mailing Address

10901 BRIGHTON BAY BLVD NE, SUITE 9312 **10901 BRIGHTON BAY BLVD NE, SUITE 9312**
ST PETERSBURG FL 33716 **ST PETERSBURG FL 33716**

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
3825 HENDERSON BLVD
 Suite, Apt. #, etc. **400**
 City & State **TAMPA FLORIDA**
 Zip **33629** Country **FLORIDA**

3. New Mailing Office Address, If Applicable
10901 BRIGHTON BAY BLVD NE,
 Suite, Apt. #, etc. **# 10103**
 City & State **ST PETERSBURG FL**
 Zip **33716** Country **PINELLAS**

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 01 OCT 29 AM 11:36



4. Date Incorporated or Qualified To Do Business in Florida **11/09/2000**

5. FEI Number **22-3763910** Applied For Not Applicable

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

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PSTD	SHELTON, JAMES S	10901 BRIGHTON BAY BLVD NE, SUIT	ST PETERSBURG FL 33716

8. Name and Address of Current Registered Agent
SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

9. Name and Address of New Registered Agent
 Name **JAMES S. SHELTON**
 Street Address (P.O. Box Number is Not Acceptable) **10901 BRIGHTON BAY BLVD NE,**
 Suite, Apt. #, Etc. **# 10103**
 City **ST PETERSBURG** State **FL** Zip Code **33716**

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent **[Signature]** **SIGNATURE REQUIRED** Date **10/1/01**
 REGISTERED AGENT MUST SIGN

11. 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: **[Signature]** **SIGNATURE REQUIRED** **JAMES S. SHELTON** Date **10/1/01** Daytime Phone # **(727) 481-4314**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2ED40 (8/01)

SCG Marketing, Inc.

3825 Henderson Blvd.
Suite 400c
Tampa, FL 33629

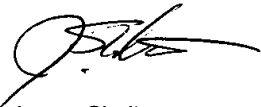
October 23, 2001

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sirs:

I was informed, by calling the phone number listed on your notice, that I was to write a letter regarding the lack of receipt of your prior notices. ~~My home and mailing address has change~~ to: 10901 Brighton Bay Blvd NE # 10103 St Petersburg FL 33716. In addition, my business address has change as well. The new address is: 3825 Henderson Blvd Suite 400 C Tampa, FL 33629. With two address changes I did not receive your notices in a timely fashion. I think I have corrected the problem and that is how I got the last notice. I was instructed to send this letter with a check in the amount of 150.00. If there are any questions please contact me as soon as possible. WK 877-209-0054 CELL 727-481-4314.

Sincerely,



James Shelton
President
SCG Marketing Inc.