2004 FOR PROFIT CORPORATION REINSTATEMENT

REINSTATEMENT				FILED	
DOCUMENT # P00000110056				05 FEB -7 AH 8: 49	
JOHN OSGOOD NEUROMUSCULAR THERAPY, INC.					
			465	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 4685 TAMIAMI TRAIL NORTH NAPLES, FL 34103		Mailing Address 4685 TAMIAMI TRAIL NORTH NAPLES, FL 34103		, LONIDA	
a Desired One	and Durbase	3. Mailing Address			
2. Principal Place of Business_		3. Walling Publicas		T. I TETRIERI IYI UNITI BOTIK ASHIK UNITI WENEY ATORI UNITI WENEY ATORI UNITI WENITUW IE ERDI.	
Suite, Apt. If, etc.		Suite, Apt. #, etc.		11022004 REIN-P CR2E098 (6/04)	
Cily & State		City & State		4. FE! Number	***
Zlp	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Current	legistered Agent		7. Name and Address of New Registered Agent	
Name Name					
OSGOOD, JOHN LMT 4685 TAMIAMI TRAIL NORTH Street Address (P.O.				(P.O. Box Number is Not Acceptable)	\neg
NAPLES, FL 34102					
	Lib M	Man	City	FL Zip Code	\neg
8. The above named entire submit statement for the purpose inicianging is registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
7-3-00					
SIGNATURE Signature, bypactor present norms of requisitored agent and the 8 appricable— PROTE Registered Agent algorithms required when releasteding) DATE					
FILE NOWIN FEE IS \$750.00 After January 1, 2005, Fee will be \$900.00					
10.	OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	\dashv
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	NAPLES, FL 34103		CITY-\$1-ZIP		
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12. I hereby certify that the information surplied with his time dees not applied for the exemption stated in Section 119.07(3VI). Florida Statutes, I further certify that the information indicated on this report or supplemental error) is true and execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
indicated o	ertify that the information surplied with in this report of supplemental or or is oration or in a copyet of fullee empo	this thing does not applied or the and adourate and that may wered to exocute his reports	he exemption stated in S signature shall have the a regulred by Chapter 60	Section 119.07(3)(f), Florida Statutes, I further certify that the information e same tegal effect as it made under oath; that I am an officer or direct 07, Florida Statutes; and that my name appears in Block 10 or Block 1	ກ or 1 if
indicated of of the corp changed, o	ertify that the information surplied with on this report or supplied mich experts or ation or the Reporter of future empror or on an adactment with an address.	this time operate operate or oper	he exemption stated in S signature shall have the a required by Chapter 60	Section 119.07(3)(f), Florida Statutes, I further certify that the information a same legal effect as it made under eath; that I am an officer or direct or, Florida Statutes; and that my name appears in Block 10 or Block 1	מר זוו זוו
indicated of the corp changed, of	URE: IN	mis time does not applie Vor more and adoptinate and tipal mis worked to execute his reported the all other like emplowered.	\mathcal{S}_{1}	Section 119.07(3)(f), Florida Slatutes, I further certify that the information is same legal effect as it made under oath; that I am an officer or direct or, Florida Statutes; and that my name appears in Block 10 or Block 1 2-3-05 239 253-21	1 if

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John Osgood Neuromuscular Therapy, Inc 4685 Tamiami Trail North Naples, Fl 34103 (239) 263-6062

To Whom it May Concern:

Please accept my apologies for failing to file the 2004 annual report.

In the past I had received a large package via the mail referencing the renewal and now as I understand it, the paperwork has been reduced to a postcard size notification in which I did not recieve. It is my intent to continue in good standing for my business. This year has proved many unexpected hardships for my corporation so I ask that you please consider accepting the \$150 payment to reinstate my corporation.

With Sincere Apologies and Many Thanks,

Mr. Dunlas This is a Copy of the letter we dent in with the \$150 2004 for about 2 Weeks