

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT  
 FLORIDA DEPARTMENT OF STATE  
 Jim Smith  
 Secretary of State  
 DIVISION OF CORPORATIONS



FILED

02 NOV 25 AM 9:06

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

DOCUMENT # P01000001036

1. Corporation Name

MY THREE DIAMONDS, INC.

Principal Place of Business

Mailing Address

8333 LOWMAN AVE.  
 ORLANDO FL 32818

8333 LOWMAN AVE.  
 ORLANDO FL 32818



300009201213  
 11/25/02--01052--013 \*\*150.00

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

2. New Principal Office Address, If Applicable  
 153 Stone Gable Circle  
 Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable  
 153 Stone Gable Circle  
 Suite, Apt. #, etc.

4. Date Incorporated or Qualified To Do Business in Florida  
 01/03/2001

5. FEI Number  
 59-3687161  
 Applied For  
 Not Applicable

City & State  
 Winter Springs, FL  
 Zip  
 32708  
 Country  
 USA

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 Winter Springs, FL  
 Zip  
 32708  
 Country  
 USA

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
PD	GEORGE, RACHAEL	8333 LOWMAN AVE. 153 Stone Gable Circle	ORLANDO FL 32818 Winter Springs, FL 32708
VD	GEORGE, SUZANNE	8333 LOWMAN AVE. 153 Stone Gable Circle	ORLANDO FL 32818 Winter Springs, FL 32708

8. Name and Address of Current Registered Agent

GEORGE, RACHAEL  
 8333 LOWMAN AVE.  
 ORLANDO FL 32818

9. Name and Address of New Registered Agent

Name  
 Rachael George  
 Street Address (P.O. Box Number is Not Acceptable)  
 153 Stone Gable Circle  
 Suite, Apt. #, Etc.  
 City  
 Winter Springs  
 State  
 FL  
 Zip Code  
 32708

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. or 617.0505, F.S.

Signature of Registered Agent

*Rachael George*  
 SIGNATURE REQUIRED  
 REGISTERED AGENT MUST SIGN

Date 11/22/02

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:

*Rachael George*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/22/02  
 Date

407-327-7608  
 Daytime Phone #

CR2ED40 (8/02)

November 22, 2002

To Whom It May Concern:

I have just received a Notice of Administrative Dissolution /Revocation from you for my Corporation, My Three Diamonds, Inc. Fortunately it was forwarded to me by the new owners at my previous address. I enclosed a copy of the address label. I have no idea why your other mailings weren't forwarded but this is the first one that I have received.

I have enclosed the fee to file the report without penalty of \$150.00. If you need anything further from me please contact me at:

Address: 153 Stone Gable Circle Winter Springs, FL 32708

Phone: 407-327-7608

Email: Cmtraditions@cfl.rr.com

Thank you for your attention to this matter.

Sincerely,

A handwritten signature in cursive script that reads "Rachael George". The signature is written in black ink and is positioned above the printed name.

Rachael George