

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



**CORPORATION
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

OZ BR

FILED

02 NOV 25 AM 9:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

DAVAL ENTERPRISES, INC.
P 01000001237

800009198708
11/25/02--01028--022 **150.00

2. Principal Office Address

101 E. CLIFFORD AVE

3. Mailing Office Address

P O BOX 1521

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

EUSTIS, FL.

City & State

EUSTIS, FL.

Zip

32726

Country

USA

Zip

32727

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

JANUARY 4, 2001

5. FEI Number

59-3691126

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

STEPHEN M. STONE

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

725 NORTH MAGNOLIA AVE.

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32803

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

REGISTERED AGENT MUST SIGN

Date

11/19/02

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
P	DAVID W. ROSEMAN	101 E. CLIFFORD AVE.	EUSTIS, FL 32726
SVP	VALERIE KAY ROSEMAN	101 E. CLIFFORD AVE.	EUSTIS, FL 32726
S/T	VALERIE BLANTON	101 E. CLIFFORD AVE.	EUSTIS, FL 32726

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:

DAVID W. ROSEMAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/19/02

Date

(352) 589-6828

Daytime Phone #

CR02061 (9/01)

g 11/27



November 20, 2002

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

To Whom It May Concern:

It has recently come to my attention that our corporation, Daval Enterprises, Inc. d/b/a Holiday Tent Rentals, has been dissolved. In my efforts to determine why this has happened, I contacted the Division of Corporations and was advised that we are to renew our incorporation yearly. The office informed me that a notice was sent out, but was sent to our physical address, not our mailing address. Our correct mailing address is P.O. Box 1521, Eustis, FL 32727. I am following up with your office, which advised me to write this letter, provide the \$150 annual fee, and request that you please waive the reinstatement fee, as we did not receive the renewal notice.

Attached, please find the reinstatement form, signed by our registered agent and the owner of our corporation. Thank you for your consideration.

Sincerely,

Valerie Blanton
Secretary/Treasurer
Daval Enterprises, Inc.