11/14/2003 17:40 CCRS → 2050384 NO.024 P02

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 NOV 14 PM 5:49

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000008655

1. Corporation Name: Equity Growth & Management Corporation

REINSTATEMENT D

2. Principal Office Address	3. Mailing Office Address
5400 Cartee Road	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: LAKE MARY	City & State: FL ~~3[illegible]~~
Zip: 32746 Country: USA	Zip: Country:

4. Date Incorporated or Qualified To Do Business in Florida:
5. FEI Number: 59-3694846 — Applied For / Not Applicable
6. Certificate of Status Desired ☐

7. Name and Address of Current Registered Agent

Name: LOE BRIAN R
Street Address (P.O. Box Number is Not Acceptable): 3074 West Lake Mary Blvd. #136
Suite, Apt. #, Etc.:
City: LAKE MARY FL   State: FL   Zip Code: 32746

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: [signature]   REGISTERED AGENT MUST SIGN   Date: 11/14/03

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	WAITE, Noreen E	5400 Cartee Rd	Lake Mary, FL 32746
DPS	WAITE, Thomas E, President & Secretary	5400 Carter Road	LAKE MARY FL 32746

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: [signature] 11-14-03 407-344-0199
Signature and Typed or Printed Name of [illegible]   Date   Daytime Phone #

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Dept of State, Division of Corporation

Please waive penalty fees as we did not receive our 2003 UBR.

Noreen Waite
Equity Growth Management
P01000008655

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Florida Department of State

Division of Corporations
Public Access System

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From:
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RUSH / WAITE

CORPORATION REINSTATEMENT

EQUITY GROWTH & MANAGEMENT CORPORATION

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ATTN: Andy Dunlap