


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**

 **FLORIDA DEPARTMENT OF STATE**
Secretary of State
DIVISION OF CORPORATIONS
W 05 000 22464

05 JUN -1 PM 2:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000021935

1. Corporation Name

F.G. HOWARD, JR. ENTERPRISES, INC.

800055656378

06/02/05--01029--016 **1030.00

2. Principal Office Address 3355 Ocean Drive Suite, Apt. #, etc. City & State Vero Beach, FL Zip 32963		Country USA		3. Mailing Office Address 2828 Hood Street Suite, Apt. #, etc. Apt. 408 City & State Dallas, TX Zip 75219		Country USA	
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4. Date Incorporated or Qualified To Do Business in Florida 03-01-2001	
5. FEI Number 65-1104309	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name Frank G. Howard, Jr.	
Street Address (P.O. Box Number is Not Acceptable) 515 N. Flagler Street	
Suite, Apt. #, Etc. Suite 305	
City West Palm Beach	State FL
	Zip Code 33401

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 Frank G. Howard, Jr. Date 4-14-05

REGISTERED AGENT MUST SIGN

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
D	Frank G. Howard, Jr.	2828 Hood Street, Apt. 408	Dallas, TX 75219

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: Frank G. Howard, Jr. Date 4-3-05 Daytime Phone # 521 632 6960

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR