## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FL P DEP	ARTIMENT OF	BP	03 MAY 28 AM 8: 36	
DOCUMENT # P01000026008  1. Corporation Name				SECRETARY OF STATE FALLAHASSEE, FLORIDA	
,Bonham Group Enterprise ♀ }	s, Inc			ı	
<b>2.</b> Principal Office Address <b>3.</b> Mailing 5660 NW 115 CT <b>5660</b> N					
Suite, Apt. #, etc. Suite, Apt			4. Date I	incorporated or Qualified 3/13/01	
City & State Miami	City & State Miami	ami		umber Applied For S51082592 Not Applicable	
Zip Country 33178 USA	33178	USA	6. CERTIF	ICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status	
Name Massimiliano Palmieri  Street Address (P.O. Box Number is Not Acceptable)  - 7335 SW PST  Suite, Apt. #, Etc.  City MIAM  State Zip Code FL 33 144					
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					
Names and Street Addresses of Each Officer and/or Director (Florida non  Name of Officers and/or Directors		Street Add	must list at least 3 director dress of Each d/or Director	City / State / Zip	
-MM Massimilians A	duieri 73	35 SW		Mani, Fl 33144	
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 filling 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 AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Daytime Phone #					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #					

April 29, 2003

## TO WHOM IT MAY CONCERN

This letter is to make reference about that Bonham Group Enterprises, Inc did not receive the 2002 first and second form.

The new address of the company is 5660 NW 115 CT #201, Miami, FL 33178.

Thanks,

Massimiliano/Palmieri

Director

Bonham Group Enterprises -



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 13, 2003

BONHAM GROUP ENTERPRISES, INC. 5660 NW 115 CT #201 MIAMI, FL 33178

SUBJECT: BONHAM GROUP ENTERPRISES, INC.

Ref. Number: P01000026008

We have received your document for BONHAM GROUP ENTERPRISES, INC. and check(s) totaling \$300.00. However, your check(s) and document are being returned for the following:

\*

List the complete title, name, street address, city, state and zip code of each officer/director of the corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Andy Dunlap
Document Specialist Supervisor

Letter Number: 203A00029429

+It was completed in the form.