## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>.</b>				print 1 t form
CORPOR		(A) .	PARTMENT OF STATE	FILED
REINSTAN		3	Katherine Harris Secretary of State IVISION OF CORPORATIONS	02 NOV -4 AM 11: 32
•		DIVISION		SECNLIANY OF STATE TALLAHASSEE, FLORIDA
DOCUMENT Corporation Name	NT # P-0100	00 59 10	7	0%
1. Corporation Name	fift The S	pot Paint	ing. Inc.	المؤهدي. المؤهدي
		,	7 1 4.10.	900000000
. <b>⊕</b> r				900008784149 11/04/0201072002 **150.00
2. Principal Office Address 3. Mailing O			Address	-
2328 Britannia Rd.				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. Date Incorporated or Qualified
City & State:		·City & State	ونيد استرده د وندند	To Do Business in Florida 66/11/2001
Saraso <sup>.</sup>	· • • • • • • • • • • • • • • • • • • •			5. FEI Number Applied For Not Applied For
34231	Sarasota	Zip	Country	6. CERTIFICATE OF STATUS DESIRED 6 \$8.75 Additional Fee required for a Certificate of Status
City	25 F; 13+ pt. #, Etc.  okom is the registered agent of the above	ove named corporation,	am familiar with and accept the o	State Zip Code FL 34275 obligations of section 607.0505 or 617.0503, F.S. Date 10/28/2002
Signature of Registered Agent	R	EGISTERED AGENT N		
Registered Agent	Addresses of Each Officer an	nd/or Director (Florida no	enprofit corporations must list at le	east 3 directors)
9. Names and Street Titles	Addresses of Each Officer an Name of Officers and/or Directors	nd/or Director (Florida no	inprofit corporations must list at le	east 3 directors)  ch or City / State / Zip
9. Names and Street Titles	Addresses of Each Officer an	nd/or Director (Florida no	onprofit corporations must list at le Street Address of Each Officer and/or Director	east 3 directors) ch cr City / State / Zip
9. Names and Street Titles	Addresses of Each Officer an Name of Officers and/or Directors	nd/or Director (Florida no	onprofit corporations must list at le Street Address of Each Officer and/or Director	east 3 directors)  ch or City / State / Zip
9. Names and Street Titles	Addresses of Each Officer an Name of Officers and/or Directors	nd/or Director (Florida no	onprofit corporations must list at le Street Address of Each Officer and/or Director	east 3 directors)  ch or City / State / Zip

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Hitt The Spot Painting, Inc.

2328 Britannia Road Sarasota, FL 34231-4144 (941) 927-7149

Florida Department of State Division of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, FL 32314-6327

RE: P01000059107

65-1118032

To Whom It May Concern:

Please be advised that my corporation changed its address as of October 2001-and I never received my form for the Corporate Annual Report. My accountant has now informed me that my corporation has been Dissolved Administratively due to you not receiving the form or payment by May 1, 2002. I apologize for this oversight as I was unaware that this was required. Please accept my enclosed check in the amount of \$150.00 for the filing fee for the year 2002 and could you please waive the penalty. The address on the enclosed Reinstatement application is correct and should remain so for at least three years. I am now aware of the filing requirements and will conform to such in the future.

Thank you in advance for you understanding and consideration on this matter.

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Sincerely,

Michael J. Hitt, President - Director