PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 JAN 20 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000060741

1. Corporation Name

Stephen's Enterprises, Inc.

| 2. Principal Office Address | 3. Mailing Office Address |
|---|---|
| 13615 So. Dixie Hwy | 2160 NW 79 St. |
| Suite, Apt. #, etc.: 114566 | Suite, Apt. #, etc.: |
| City & State: Miami, FL | City & State: Miami FL |
| Zip: 33176 Country: USA | Zip: 33147 Country: USA |

4. Date Incorporated or Qualified To Do Business In Florida: 6-19-01

5. FEI Number: 65-1113377 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: M. Turner

Street Address (P.O. Box Number is Not Acceptable): 13615 South Dixie Highway

Suite, Apt. #, Etc.: 114566

City: Miami State: FL Zip Code: 33176

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: X M. Turner Date: 1-19-05
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 |
|---|---|---|---|
| PSTD | M. Turner | 13615 So. Dixie Hwy Suite 114566 | Miami, FL 33176 |
| | | | |
| | | 100045448591 01/26/06--01039--006 **450.00 | |
| | | REINSTATEMENT | 03-05 |
| | | | |
| | | | |

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: X M. Turner 1-19-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Doc. #P01000060741

"Stephen's Enterprises, Inc."

Dear Sirs,

Enclosed please find a check to cover 2003, 2004, 2005's annual reports. I did not receive any notice in the mail so if you could please waive the penalty fee I would greatly appreciate it.

Thank You!

M. Turner