PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

| -APPLICATION |
|---------------|
| FOR 🐪 |
| REINSTATEMENT |



FLORIDA DEPARTMENT OF STATE Jim Smith

Secretary of Stars **DIVISION OF CORPORATIONS**

| DOCUMENT # | P01000068978 | 3 |
|------------|--------------|---|
| | | |

1. Corporation Name

EASY GOING ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED 03 APR 14 AM 8: 41 SECRETARY OF STATE

TALLAHASSEE, FLORIDA



| · · · · · · · · · · · · · · · · · · · | | | 2822 PROCTOR RD SUITE A SARASOTA FL 34231 | | | | | | | |
|--|---|------------------------------------|--|--|---|-----------------------|----------------|---|------|--|
| If above a | addresses are incorrect in any way, line | through incorrect | information a | and enter correction below. | 7-17- | -02 | 90 | 33 025 | 150. | |
| New Principal Office Address, If Applicable 3. New Mail Suite, Apt. #, etc. Suite, Apt. #, | | ling Office Address, If Applicable | | 4. Date Incorporated or Qualified To Do Business in Florida 07/01/2001 | | | | | | |
| | | Suite, Apt. # | #, etc. | | | | | | | |
| City & State | | City & State | ity & State | | 5 FELNumber Applied For Not Applied For | | | | | |
| Zip | Country | Zip | | Country | 6. Certieicati | E OF STATUS (| | 8.75 Additional Fee for a Certificate of | | |
| 7. Names | and Street Addresses of Each Officer a | nd/or Director (Fl | orida nonpro | fit corporations must list at lea | ast 3 directors) | | | | | |
| Title(s) | Name of Officers and/or Directors | | 3 | Street Address of Each Officer and/or Director | | | | | | |
| D | DEWALD, BRYAN T | | | OCTOR RD., SUITE A | SARASOTA FL 34231 | | | | | |
| | | | | | | | | | | |
| i | | | | | | | | | | |
| | , | | | | 4.0 03/06/ | DO1 3 03010 | 36265 43001 | 524 **600.00 | | |
| | | | | | an | | | Da | | |
| | | • | | | U37 247 | 1301 0 | <u> </u> | 5.24 **) 50.00 | | |
| | | | | RE | AI CVII | ILW | eni/ | 22-09 | | |
| 8. Name and Address of Current Registered Age | | | ent | | 9. Name and Address of New Registered Agent | | | | | |
| DEWALD, BRYAN T 2822 PROCTOR RD., SUITE A SARASOTA FL 34231 | | | Street Address (P.O. Box Number is Not Acceptable) 4387 Eastwood Suite, Apt. #, Etc. | | | | | 1 1 | | |
| 40 l haina | | | | | ensota | 607.0505 | Sta F | L 3423 | 9 | |
| Signature o | g appointed the registered agent of the a | _ | / | Amiliar with and accept the of | ongations of Sect | Date | 4/- l | | | |

11. 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.

REGISTERED AGENT MUST SIGN



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

March 7, 2003

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EASY GOING ENTERPRISES, INC. 2822 PROCTOR RD., SUITE A SARASOTA, FL 34231

SUBJECT: EASY GOING ENTERPRISES, INC.

Ref. Number: P01000068978

We have received your document for EASY GOING ENTERPRISES, INC. and your check(s) totaling \$750.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Because your reinstatement was not completed in time for you to receive a annual report form/uniform business report, we must collect the fee(s) due for the current calendar year. Therefore, the total amount due to reinstate the entity is \$900.00.

There is a balance due of \$150.00.

Pursuant to section 607.1422(1)(b), 617.1422(1)(b), or 608.4482, Florida Statutes, your designated registered agent must acknowledge the designation by signing in the appropriate block of the form.

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.

Justin M Shivers
Document Specialist

Letter Number: 803A00014641