2005 FOR PROFIT CORPORATION REINSTATEMENT

REINSTATEMENT								
DOCUMENT # P01000082931							FIL	ED
1. Entity Nam						F1L	בט	
JLG CON	ISULTING GROUP, INC.				3		05 APR - I	PM 12: 16
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Principal Place of Business Mailing Address							SECRETARY	OF STATE
9951 ATLAN	ITIC BLVD SUITE 248	9951 ATLANTIC BLVD SUITE 248					TALLAHASSE	EE, FLORIDA
JACKSONVILL	.E, FL 32225	JACKSONVILLE, FL 32225						
					1		\$4 	
	lace of Business	3. Mailing Address				1241F1E1E1F1		
P.D.G Suite, Apt.		P. 0 BUX 54 SU9 Suite, Apt. #, etc.			_ Heim	OME	TANTER !	194-05
oute, ripi.	n, 010.	Solie, Apr. #, etc.			03292005	REIN-P	CR2E098 (6/0	4)
City & Stat		City & State			4. FEI Numbe			Applied For
<u>Jack</u> Zip	Sonville Fix.	Zip Country O			59-3740	0341		Not Applicable
32245-4	1 - 1	32245-4509		in a	5. Certificate	of Status Desired	□ \$8.75 / Fee Requ	
	6. Name and Address of Current I	7. Name and	Address of New R	egistered Agent				
BUSINESS FILINGS INCORPORATED Name Name								
	JEFFERSON STREET	Ì	Street Address (P.O. Box Number is Not Acceptable)					
TALLAHASSEE, FL 32301-0000								
			-	City		4 .	₹ Zip C	ode
City Ponte Vedra Bch FL Zip Code 30082								
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE MARCY a Smolen CPA NARCY a Smolen 3/29/05								
SIGNATURE Signature, typed or printed name of registered agont and title if applicable (NOTE: Registered Agent eignature required when reinstating) DATE								
FII	LE NOW!!! FEE IS \$300.00						vith s. 607.193(2)(I not receive the price	
10.	OFFICERS AND I	DIRECTORS	11.		ADDITIONS (CHANGES TO OFFI	ICERS AND DIRECTO	SPC IN A
TITLE	D	Delete	TITLE		ADDITIONS	CHANGES TO OFFI	CERS AND DIRECTO	·
NAME	GUERRERO, JONATHAN				0.0BUL 50	1574		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information								
indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other fixe, empowered.								
SIGNATURE: SIGNATURE AND TYPED'OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Descriptions								
	/ Januari une rusu i i PEU OR P	ITANIC OF BIDAING OFFICEN OR	DINELL	un.		Uate .	Daytime Phone	

Nancy A. Smolen, CPA 175 Great Harbour Way #2802 Ponte Vedra Beach, FL 32082 904-280-7585/1-775-890-7852 (fax)

March 29, 2005

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: JLG Consulting Group, Inc. Document # P01000082931

-Dear Sir/Madam:

I am the tax return preparer for the above referenced Corporation. Enclosed please find a 2005 For Profit Corporation Reinstatement for the Corporation along with a check in the amount of \$300. The Corporation was administratively dissolved for failure to file the annual report due 5/1/04.

The Corporation closed its office located at 9951 Atlantic Blvd, Suite 248, Jacksonville, FL 32225 in early 2003 and began using a Post Office Box as its business address. The Corporation did not receive the notification card regarding the annual report and Jonathan Guerrero, the sole shareholder effective October 17, 2003, was not aware of the filing requirement.

Based on the above, I respectfully request that the Corporation be reinstated and the reinstatement fee in the amount of \$600 be abated.

If you have any questions or need further information, please contact me at 904-280-7585.

Very truly yours,

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Nancy A. Smolen, CPA

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CC: Jonathan Guerrero, JLG Consulting, Inc.