PLEASE READ A	ALL INSTRUCTIONS BEFORE	COMPLETING THIS EDRM.
CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	OH APR 22 AM 9: 18  SECRETARY OF STATE TALLAHASSEE, FLORIDA
DOCUMENT# PO1600091627  1. Corporation Name  Prince Groves, Inc.		PEINSTATEMENT 02-04 700033444167 04/21/04-01065-001 **308.75
2. Principal Office Address  5411 willis RJ  Suite, Apt. #, etc.	3. Mailing Office Address  5411 willis R Suite, Apt. #, etc.	04/21/0401085001 **308.75
City & State Palmetto FL Zip Country 34221	City & State  Palmetto FL  Zip 34221  Country	4. Date Incorporated or Qualified To Do Business in Florida 9 19 200   5. FEI Number Applied For Not Applicable  6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
3 ( 2 3 )	7. Name and Address of Current Regist	
Street Address (P.O. Box Number is Not Acceptable)  5411 Willis RI  Suite, Apt. #, Etc.  City  Palmetto  State Zip Code FL 34221		
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		
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)		
Name of Officers and/or Directors	Street Address of Ea Officer and/or Direct	
PD Prince, Chest	er W 5411 Willis R	Palmetto FL 34221
SD Prince, Anne	- L 5411 - withis	R) - Palmetto FL 34221
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		, **
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 stricture shall have the large tend effect as if made under oath.  Che ster W. Prince  SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Date  Dayline Phone #		

March 17, 2004

Enclosed please find our form for corp. reinstatement. I was unaware of the dissolution until today. Enclosed please find copies of my past correspondence. In a nut shell- we incorporated in the fall of 02. I was unaware we should have received a report to renew each year. The first notice I got I sent the \$150 filing fee. I then got a letter back that I had not provided a FEI number. I filled out the form and sent it in. The check was cashed so I thought that all was well. Today, I went on line to renew and discovered we were inactive. I called and was told to submit the form for reinstatement and \$150 for 03 and \$150 for 04 and \$100 for reinstatement and \$8.75 for a certificate of Status. I hope this is correct. Thank you for reviewing this jumble for us.

Sincerely,

Anne Prince Prince Groves

Doc. # P01000091627