PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P01000103684

1. Corporation Name

PEARLY WHITES ONLINE, INC.

Principal Place of Business

Mailing Address

790 MULLET RD. #13 PORT-CANAVERAL-FL 32920790 MULLET RD.-#13-

PORT CANAVERAL FL 32920

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

. New Principal Office Address, if Applicable	3. New Mailing Office Address, if Applicable		
ويساء بالمصادينين			
Suite Aprit, etc. E Central Ave	Suite, Apt. #, etc. 1685 E Central Ave		
City & State	City & State		

FILED

03 DEC -2 AM 10: 36

SECRETARY OF STATE TALLAHASSEE, FLORIDA



10/25/2001

5. FEI Number

59-3747998

Applied For Not Applicable

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names a	and Street Addresses of Each Officer and/or Director (Flo	rida nonprofit corporat	tions must list at least 3 d	irectors)	
Title(s) 1	Name of Officers and/or Directors		eet Address of Each icer and/or Director		City / State / Zip
D	DOYLE, PATRICIA A	7 90 MULLET RD :	#13 -		CAPE CANAVERAL FL 32920
\mathbb{D}	Michelle M Dorsey	1685 E.	Central Ave	2	Merritt FSLAND FL 32952
			e com		
	,) <u>1</u>		.80	<u> </u>
		*.		12/02/	0301039011 **150.00
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent		

DOYLE, PATRICIA A 2023 N ATLANTIC AVE #315 COCOA BEACH FL 32931-3386

Zip Code 32 95 2

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Ager

REGISTERED AGENT MUST SIGN

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 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 signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Pearly Whites Online, Inc. 1685 E Central Avenue Merritt Island, FL 32952

Florida Department of State Division of Corporations P O Box 6327 Tallahassee FL 32314

RE: Uniform Business Report
Application for Reinstatement

Enclosed is the completed Application for Reinstatement for Pearly Whites Online, Inc. along with a check for \$150.

In accordance with the instructions on the package received from the Florida Department of State, we are asking for a waiver of the reinstatement fee for the following reason:

This is the first notice for the annual report that was received by the corporation. The address you have on file for this Corporation (790 Mullet Road #13, Port Canaveral) was an active address through August of this year. The corporation did very little business in 2002 and 2003 and since our address was a warehouse location, the mail was only being checked every several weeks. Since the mail was not being checked frequently, the postal service stopped delivering mail several times throughout the year because they thought there was no activity with this mailbox. We would assume that any previous correspondence was returned to the State of Florida.

We closed that location and put in a mail forwarding card for our new address and the Reinstatement Application (which was forwarded to our new address) is the first correspondence we have received from the State.

Thank yoʻu,

Michelle M. Dorsey, President