PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
08 NOV -6 PM 4:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000106238

200137698132
11/06/08--01016--015 **300.00

1. Corporation Name: Twiss & Twiss, Inc.

REINSTATEMENT 07-08

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
1501 Lake Ave SE	1501 Lake Ave SE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Largo, FL	City & State: Largo, FL
Zip: 33771 Country: USA	Zip: 33771 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 11/02/2001

5. FEI Number: 593755782 ☐ 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: Hale, Fred H

Street Address (P.O. Box Number is Not Acceptable): 5650 Park Blvd

Suite, Apt. #, Etc.: Suite 1

City: Pinellas Park State: FL Zip Code: 33781

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

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 _____ Date 11/3/08
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
D	Ernest P Twiss	7297 Rosetree PL W	Seminole, FL 33772

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 contained in Chapter 119, 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: Ernest P. Twiss 11-3-08 727-452-4838
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Ernest P. TWISS

2852

To Whom It May Concern:

My corporation, Twiss & Twiss, Inc., had been dissolved on 09/14/2007. This was in error due to the wrong address being shown for the Principal and Mailing Addresses.

The information read:
7297 ROSETREE PL W
SANFORD, FL 32772-5708

It should have read:
7297 ROSETREE PL W
SEMINOLE, FL 32772-5708

With the city being different, I never received the Annual Report notice. This did not come to my attention until just recently upon checking some records.

I am not sure how this error happened but I would like to file for reinstatement effective immediately.

I am enclosing a check for $300.00 to cover the past two years of Annual Report fees(2007 and 2008). I'm requesting that the reinstatement fee of $600.00 be waived due to the error explained above.

Thank you,

Ernie Twiss,
Twiss & Twiss, Inc.