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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE 2007 MAR 14 PH 3: 59 CORPORATION Secretary of State REINSTATEMENT SECRE MAN TALLAHASSEE, FLORIDA DIVISION OF CORPORATIONS 000112618 **DOCUMENT #** 11/08/05 01002 011 600,00 CR2E081 (1/07) 4. Date Incorporated or Qualified To Do Business in Florida Applied For 5. FEI Number Not Applicable 6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee require for a Certificate of Status 7. Name and Address of Current Registered Agent 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 flamed corporation, am familiar with and accept the obligations of section 607.0505 or 617.9503, 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) Street Address of Each Officer and/or Director Titles City / State / Zip 10.1 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



Division of Corporation Attn Tyrone Scott

As per our phone call you said to file a new reinstatement form, at the time of doing first one on 11/11/05 your office said the name was not available. We would like you to take the money on file which is \$600.00 along with this check for \$300.00 and reinstate the corporation C & J Industries Inc Document number p01000112618. Thank you for your time in concerning this matter.

Bonnie Thomas 386-304-1000 ext 10

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JOSEPH A. LOGUIDICE, CPA 1515 Ridgewood Ave Ste A Holly Hill, Florida 32117

March 14, 2007

As C.P.A. for Corina Nesbit and C & Jundustries, Inc this letter is to confirm that we are in the process of changing the principal address for C & J Industries to 105 John Anderson Drive Ormond Beach, Fl 32176

If you have any questions please feel five to give me a call at (386) 304-1000

Sincerely.

Joseph A. Loguidice, CPA