PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 OCT -6 AM 10:48

DOCUMENT # P02000003951

1. Corporation Name: NewBay Auto Sales Inc.

700023936857
10/20/03--01009--022 **150.00

2. Principal Office Address	3. Mailing Office Address
6245 N. Dale Mabry Hwy.	6245 N. Dale Mabry Hwy.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tampa FLA.	City & State: Tampa FLA.
Zip: 33614 Country: Hillsborough	Zip: 33614 Country: Hillsborough

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

5. FEI Number: 593552938 ☐ 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: Neal Scott

Street Address (P.O. Box Number is Not Acceptable): 4014 Dana Shores Dr.

Suite, Apt. #, Etc.:

City: Tampa | State: FL | Zip Code: 33634

8. I being appointed the registered agent of the above named corporation, acknowledge with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: _____ Date: 10/3/03
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
S	Frank Jones	3019 Colonial Ridge Dr.	Brandon FLA 33511
P	Neal Scott	4014 Dana Shores Dr.	Tampa FLA. 33634

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 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: _____ 10/03/03 (813) 390-6229
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

NEW BAY
Auto Sales
"What We Promise"
We Deliver

To Whom

New Bay Auto Sales Never Received any Notice or Form's in 2003 To Fill out A Report on our Corporation

Frank Jones

Contact
813.205-9191

ATTN: Staci

Please overnight Return

Tel: (813) 673-8771 • Fax: (813) 673-8781 6245 N. Dale Mabry • Tampa, FL 33614