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 # P02000008076

1. Corporation Name

RAY'S ENTERPRISES 2002, INC.

Principal Place of Business

Mailing Address

6401 SW 21ST STREET, APT N MIRAMAR FL 33023

6401 SW 21ST STREET, APT N

MIRAMAR FL 33023

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SECHERALY OF STATE TALLAHASSEE FLORIDA

If above addresses are incorrect in any way, line through incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable 2. New Principal Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 126/6 SW 53 St 126165WS 01/23/2002 Suite, Apt. #, etc. 5. FEI Number Applied For -038308 \$8.75 Additional Fee required CERTIFICATE OF STATUS DESIRED for a Certificate of Status 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Title(s) City / State / Zip and/or Directors Officer and/or Director D GORDON, RAYMOND 6401 SW-21ST-STREET, APT N MIRAMAR FL 33029 33027 12616 SCO 53 St 700024982397 11/24/03--01097--012 **158.75 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent GORDON, RAYMOND Street Address (P.O. Box Number is Not Acceptable) 126 r C Suite, Apt. #, Etc. 6401 SW 21ST STREET, APT N MIRAMAR FL 33023 Zip Code 37077

Signature of Registered / Date 11 - 21-03

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.

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REGISTERED AGENT MUST SIGN

9546141303 Daytime Phone #

Ray's Enterprises 2002, Inc.

6401 SW 21st Street, Ste. N, Miramar, FL 33023 Telephone (954) 614-1303

November 21, 2003

Secretary of State
Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Document #P02000008076, Renewal; EIN 03-0383081

Dear Madam:

Pursuant to our conversation today, please be advised that we did not receive a 2003 Uniform Business Report in January at all. Please remember that this is a new company and I was unaware of the renewal process. Based on your recommendation we are submitting a Corporation Reinstatement as well as a check for \$158.75 for processing. Thank you.

Yours truly,

Raymond Gordon

President