


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA


CORPORATION REINSTATEMENT  FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <u>PD2000029934</u> 1. Corporation Name <u>Professional Investors Group, Inc.</u>	
2. Principal Office Address <u>2241 2nd Ave. S.</u> Suite, Apt. #, etc.	3. Mailing Office Address Suite, Apt. #, etc.
City & State <u>St. Petersburg, FL</u>	City & State
Zip <u>33712</u>	Country <u>USA</u>

REINSTATEMENT	
4. Date Incorporated or Qualified To Do Business in Florida	
5. FEI Number <u>01-0674990</u>	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

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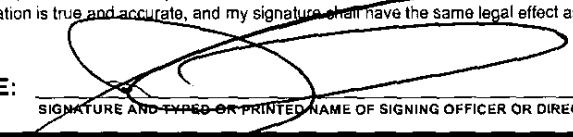
7. Name and Address of Current Registered Agent	
Name <u>Joel Atkinson</u>	
Street Address (P.O. Box Number is Not Acceptable) <u>2241 2nd Avenue South</u>	
Suite, Apt. #, Etc. 	
City <u>St Petersburg</u>	State <u>FL</u>
Zip Code <u>33712</u>	

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8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0502, F.S.	
Signature of Registered Agent 	Date <u>10/22/03</u>

CR2E081 (10/02)

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
P	Joel Atkinson	2241 2nd Avenue S. St Petersburg, FL 33712	
UP	Kevin Burke	2241 2nd Avenue S.	St Petersburg, FL 33712
UP	Thomas Burke	2241 2nd Avenue S.	St. Petersburg, FL 33712

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: 	Date <u>10/22/03</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR <u>JOEL ATKINSON</u>	Daytime Phone # <u>328-8888</u>

(727)

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PROFESSIONAL INVESTORS GROUP, INC.

2241 2nd Avenue South
St. Petersburg, Florida 33712
(727) 328-8888
Facsimile (727) 321-6872
e-mail: profinvestors@yahoo.com

October 22, 2003

Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Corporate Reinstatement for 01-0674990

Dear Sirs:

Enclosed please find our completed Corporate Reinstatement form. Additionally, we have enclosed our check for \$150.00 for the Annual Report and Corporate Supplemental Fees.

Per our telephonic conversation please waive the \$600.00 Reinstatement fee. The mail was sent to an incorrect address and we never received our Annual Report Renewal Form.

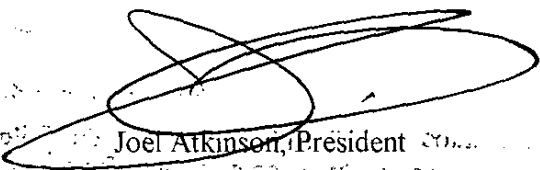
The address you have currently listed is incorrect. You sent our previous notification to 2241 2nd Avenue **North**, St. Petersburg, Florida 33712 and our company is located at 2241 2nd Avenue **South**, St. Petersburg, Florida 33712.

Please reinstate our corporation and send notification as soon as possible that this has been completed.

If you need anything further please contact me at my office as I am

Yours very truly,

PROFESSIONAL INVESTORS GROUP



Joel Atkinson, President