## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # (02 0000 31737 JEG CONSULTANTS, INC DO NOT WRITE IN THIS SPACE REINSTATEMENT 03-04 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of Cyrrent Registered Agent Name DO NOT WRITE Sex Number is Not Acceptable) Street Address (P IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed o DATE January 1 - May 1 Fee is \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing After May 1, Fee is \$550.00 \$5.00 May Be Tax filing requirement and elects to do so. Amended UBR is \$61.25 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS TITLE CR2E034B (12/01) TITLE 200025940812 01/05/04--01002--009 \*\*300.00 NAME NAME RATINION RY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that ny signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered. SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF Daytime Phone #

Delivery: 2124 Pineview Road Mailing: P.O. Box 91 Fort Myers, Florida 33902 Email: jegconsultants@cs.com Tel: (941) 278-5753 Fax: (941) 278-4213

December 30, 2003

Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

RE: Reinstatement of Corporation # P02000031737, (FEI #65-0756487)

To Whom It May Concern:

I'm writing to request reinstatement of my corporation, JEG Consultants, Inc. which I've recently realized has been dissolved.

After speaking with your office, I was advised to send a letter acknowledging that I have not received my notices of my annual report. As instructed, I'm enclosing my check in the amount \$300.00 to request reinstatement from 2003 and advance payment for 2004 along with the Uniform Business Report.

Please call me if you have any questions and thank you for your assistance in this matter.

Sincerely,

James Green

President

**Enclosures**