


APPROVED  
AND  
FILED

07 DEC -3 AM 9:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

YB 12-5-07

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT</b> 1. Corporation Name Sho -Time Enterprizes Inc. <i>P02000049108</i>			
2. Principal Office Address - No P.O. Box # 5068 Chandelle Drive		2. Mailing Office Address P.O. Box 4685	
Suite, Apt. # etc. n/a		Suite, Apt. # etc. n/a	
City & State Pensacola, florida		City & State Pensacola, Florida	
Zip 32507	Country U.S.A.	Zip 32507	Country U.S.A.
<b>REINSTATEMENT</b> <i>04-07</i>			
4. Date Incorporated or Qualified To Do Business in Florida April 29 2002 / <i>59-3703492</i> <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable			
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee req. for a Certificate of Stat			
7. Name and Address of Current Registered Agent Thomas J. Ferguson 5068 Chanelle Drive Pensacola, FI 32507 State <b>FL</b>			
<input checked="" type="checkbox"/> 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 no received and requesting the reinstatement fee be waived.			
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent <i>Thomas J. Ferguson</i> <b>REGISTERED AGENT MUST SIGN</b> Date <i>11/29/2007</i>			
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
<i>President</i>	<i>Sue Brye</i>	<i>5068 CHANDELLE DRIVE</i>	<i>PENSACOLA, FL. 32507</i>

800 112792158  
12/05/07 01075 001 \*\*\*388.75