## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS					10 MAR -9 PM 3:45				
DOCUMENT # P02000057341  1. Corporation Name													
Terra Bella Services, Inc.									REINSTATEMENT 04-10				
				10/10		363	5	1		001668529		09 10	
Principal Office Address - No P.O. Box # 3. Mailing O						Office Address			01/2	1/1001041023	**750.00	J	
19711 Eagle Run 19711					Eagle F				CR2E081 (11/09)				
Suite, Apt. #, etc. Suite, Apt. #,						etc.			ite Incorp	orated or Qualified	-	7	
City & State City & S					ate -			-	To Do Business in Florida 05/01/2002				
Groveland FL				Groveland FL					5. FEI Number Applied For 051-66-6843 Not Applied by				
Zip 34736	Country 736 US		<sup>Zip</sup> 34736		Country		6.		OF STATUS DESIDED S8 75 A	Additional Fee req Certificate of Stat	uired		
7. Name and Address of Current Registered Agent													
Name JOAN MARIE Y. BASKETT									The reinstatement fee is imposed, except in circumstances which the entity did not receive				
Street Address (P.O. Box Number is Not Acceptable) 19711 EAGLE RUN									the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.				
Suite, Apt. #, Etc.													
City State Zip Code GROVELAND FL 34736													
8. I, being	appointed the	register	ed agent of the abo	ve named corpo	ration, am f	amiliar with	and accept the	e obligations	s of section	on 607.0505 or 617.0503, F.S.			
Signature of Registered Agent REGISTERED AGENT MUST SIGN									Date 01/20/2010				
9. Names	s and Street A	ddresses	of Each Officer and	Vor Director (Flo	rida nonpro	fit corporation	ns must list a	t least 3 dire	ctors)				
Titles	Name of Officers and/or Directors				Street Address of Each Officer and/or Director					City / State / Zip			
Р	JOAN MARIE Y BASKETT				19711 EAGLE RU			UN		GROVELAND	FL 3473	36	
S	MICHAEL M SOLOMON				19711 EAGLE R			RUN	GROVELAND FL 3473		L 34736	<u>}</u>	
									J			_	
						M. MIL			13, <u>109</u>	<b>/01668529</b> /1001004003	72 **300.00		
						MAR -	<del>9 2010</del>						
<sup>10.</sup> 'E-ma	iil Addres	s: terra	abellamike@aol.	com								_	
11   Certify	that I am an o	fficer or o	lirector or the recei	ver or trustee em	powered to	execute this	ture annual rep application a	s provided f	or in chap	oter 607 or 617, F.S. I further cert	ify that when filing	<del>,  </del>	
this rein owed by	statement app the corporation	dication, t	he reason for disso	iution has been	eliminated, t	the corporate	name satisfic	es the requir	rements o	of section 607.0401 or 617.0401, I my signature shall have the same	F.S., that all fees		
SIGNA	nder oath.	100	My	Boto			larie Y.		t	01/20/2010		_ 1	
	(	`	SIGNATURE AND	TYPED OR PRINT	:U NAME OF	5IGNING OF	HUER UR DIRE	CIUK		Date	Daytime Phone #	<i>,</i> •	