

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

03 OCT 24 PM 4:42

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

APPLICATION
 FOR
 REINSTATEMENT

DOCUMENT # **P02000084848**

1. Corporation Name

BRITAIN'S "INC".

Principal Place of Business

Mailing Address

252 SHORE DRIVE
 DESTIN FL 32550

252 SHORE DRIVE
 DESTIN FL 32550

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified To Do Business in Florida

08/06/2002

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required 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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
Pres	ROY PARKER	252 SHORE DR. DESTIN FL. 32550	DESTIN FL 32550
SEC.	VIRGINIA PARKER	" " " "	" " " "
			400024091894 10/24/03--01067--010 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PARKER, ROY MR.
 252 SHORE DRIVE
 DESTIN FL 32550

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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.

Signature of Registered Agent

[Handwritten Signature]
 REGISTERED AGENT MUST SIGN

Date

10/20/03

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:

[Handwritten Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/20/03

Date

850-650-7353

Daytime Phone #

CR2E040 (7/03)

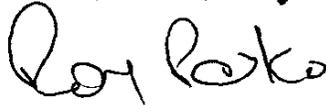
Britain's Inc
252 Shore Drive
Destin Fl.32550
Tel.850-650-7353
October 22, 2003

Florida Dept. of State
Divisions of Corporations.
Reinstatement Department.

Dear Sir or Madam,

Please find the application for reinstatement.
Please accept my apologies for the delay but to
the best of my knowledge we did not receive
the business reports package.

Yours sincerely

A handwritten signature in black ink that reads "Roy Parker". The signature is written in a cursive style with a large, sweeping flourish that extends to the right and then loops back down.

Roy Parker Pres.