

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # P02000104123

1. Corporation Name

EVEN MORE SUPERIOR SYSTEMS, INC.

Principal Place of Business

Mailing Address

4112 MARINE PARKWAY
% HARRY JAMES
NEW PORT RICHEY FL 34652

4112 MARINE PARKWAY
% HARRY JAMES
NEW PORT RICHEY FL 34652

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

09/26/2002

5. FEI Number

04-3743278

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
P	JAMES, BRIAN M	4519 WEASEL DRIVE	NEW PORT RICHEY FL 34653
V	JAMES, ROBERT A	8148 TARSIER AVENUE	NEW PORT RICHEY FL 34653

100024099681
10/27/03--01005--001 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

VALZ, JOSEPH F
710 94TH AVENUE NORTH SUITE #302
ST-PETERSBURG FL 33702

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

Joseph F. Valz
REGISTERED AGENT MUST SIGN

Date 10-18-03

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:

Brian James
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-22-03

Date

Daytime Phone #

CR2E040 (7/03)

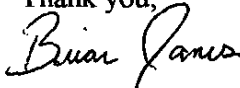
Even More Superior Systems, Inc.
4112 marine Parkway
New Port Richey, FL 34652
(727) 842-9947
(727) 842-4944

November 10, 2003

FL Dept of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Even More Superior Systems, Inc. has never received the original/second notice of the uniform business report (UBR).

Thank you,



Brian James
President