

2005 FOR PROFIT CORPORATION REINSTATEMENT

FILED

2005 OCT 19 PM 3:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



10172005 REIN-P CR2E098 (6/04)

DOCUMENT # P02000114302 1. Entity Name AYRS INC.					
Principal Place of Business 2186 CYPRESS LANDING DR JACKSONVILLE, FL 32233			Mailing Address 2186 CYPRESS LANDING DR JACKSONVILLE, FL 32233		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 75-3084655	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent AYRS, KILCHA K 2186 CYPRESS LANDING DR JACKSONVILLE, FL 32233			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____		
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
DATE _____					
FILE NOW!!! FEE IS \$750.00 After January 1, 2006, Fee will be \$900.00					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PTD AYRS, KILCHA K 2186 CYPRESS LANDING DR JACKSONVILLE, FL 32233		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000060782570 10/19/05--01068--015 **158.75	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VSD AYRS, JAMES D 2186 CYPRESS LANDING DR JACKSONVILLE, FL 32233		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. 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 my 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 10 or Block 11 if changed, or on an attachment with an address, with all rights like empowered.					
SIGNATURE: <u>JAMES D. AYRS, VICE-PRESIDENT</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date <u>10-13-05</u> (904) 651-3236 <small>Daytime Phone #</small>		

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10/24/05

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AYRS, INC.
2186 Cypress Landing Dr.
Jacksonville, FL 32233

October 13, 2005

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

REFERENCE: UBR 2005 P02000114302

Dear Sir:

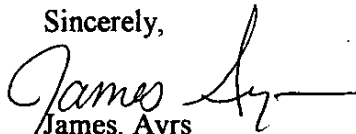
I received your Notice of Dissolution or Revocation due to non-payment of our 2005 UBR.

We moved to a new place without notifying the Division of Corporations. If you had mailed the form in our original address, we did not get it from the people renting the place. And, we were not aware that we have not filed our Annual Report not until we received your notice of dissolution.

We want to keep our Corporation as well as our responsibility to the State of Florida. In view of the above-stated reason, we are asking for a consideration to re-instate our Corporation for a fee of \$150.00. Enclosed please find Check # - 3486, in the amount of \$158.75 for our annual report fee and Certificate of status fee.

Thank you for your kind consideration, if you need additional information, you may reach me at (904)651-3226. Please mail all documents at the above address because we moved back to our original place.

Sincerely,


James Ayrs
Vice-President