

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



APPLICATION FOR REINSTATEMENT

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

FILED
 03 OCT 30 AM 11:13
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P02000117599**

1. Corporation Name

FLETCHERS' INVESTMENT GROUP, INC.,

Principal Place of Business

Mailing Address

~~6122 WASHINGTON STREET
 HOLLYWOOD FL 33023~~

~~6122 WASHINGTON STREET
 HOLLYWOOD FL 33023~~

**336 SW 185 TER
 Pembroke Pines, FL 33029**



REINSTATEMENT 03

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

4. Date Incorporated or Qualified To Do Business in Florida

10/30/2002

Suite, Apt. #, etc

Suite, Apt. #, etc

336 SW 185 TER

336 SW 185 TER

FEI Number

Applied For

City & State

City & State

Pembroke Pines FL

Pembroke Pines FL

Not Applicable

Zip Country

Zip Country

33029 FL

FLORIDA

33029 FLORIDA

6. CERTIFICATE OF STATUS DESIRED

\$6.75 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
P	LEE, ANTHONY	6122 WASHINGTON STREET	HOLLYWOOD FL 33023
P	FLETCHER, WALTER L	6122 WASHINGTON STREET 336 SW 185 TER	HOLLYWOOD FL 33023 Pembroke Pines FL 33029
VP	FLETCHER DANILIA	336 SW 185 TER	Pembroke Pines FL 33029

000024265340
 10/30/03 01007--009 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

FLETCHER, WALTER L
~~6122 WASHINGTON STREET
 HOLLYWOOD FL 33023~~

**336 SW 185 TER
 Pembroke Pines
 FL 33029**

Name: **WALTER L. FLETCHER**
 Street Address (P.O. Box Number is Not Acceptable): **336 SW 185 TER**
 Suite, Apt. #, Etc.: **Pembroke Pines**
 City: **Pembroke Pines**
 State: **FL**
 Zip Code: **33029**

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

WALTER L. FLETCHER
 REGISTERED AGENT MUST SIGN

Date

10/26/03

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:

WALTER L. FLETCHER
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

20-2403954 452-8917
 Daytime Phone #

CR2E040 (7/03)


Fletchers Investment Group, Inc
336 SW 185 Terr
Pembroke Pines, FL 33029
10/26/03

Department of State
Division of Corporations
Tallahassee, FL 32314

Dear Sir/Madam,

I am applying for reinstatement as I never received any of the prior notices you mailed to me. As you can see my business address had changed and apparently it was not forwarded to me.

Yours Truly


Walter L Fletcher
President