

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

B 1 8 2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 JUN -4 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 02000028417

1. Corporation Name

LAWDNA AVIATION GROUP, INC

2. Principal Office Address

100 KID ELLIS ROAD
Suite, Apt. #, etc.

3. Mailing Office Address

3616 HARDEN BLVD #170
Suite, Apt. #, etc.

City & State

Mulberry FL

City & State

LAKELAND FL

Zip

33860

Country

USA

Zip

33803

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

Dec. 5, 2002

5. FEI Number

04-3726678

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 8-27

7. Name and Address of Current Registered Agent

Name

JACQUE SMITH

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

3616 HARDEN BLVD #170

Suite, Apt. #, Etc.

City

LAKELAND, FL

State
FL

Zip Code

33803

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Jaquae Smith
REGISTERED AGENT MUST SIGN

Date 2 June 2004

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES	WAYNE D. SMITH	100 KID ELLIS RD	MULBERRY, FL 33860
Sec	LEE D. SMITH	3616 HARDEN BLVD #170	LAKELAND, FL 33803

10. 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: *Lee D. Smith* LEE D. SMITH (SEC) 06/02/04 863-603-9015
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (01/04)

19282

**LAWDENA AVIATION GROUP
3616 HARDEN BLVD # 170
LAKELAND, FL 33803**

2 June 2004

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

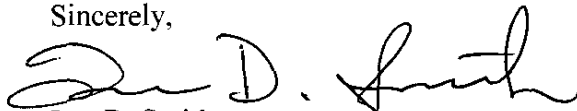
Lawdena Aviation Group Inc. FEIN # 04-3726678

Dear Sirs:

It has come to my attention that we have not received a Corporate Annual Return form for 2003 or 2004. After talking with your department by phone this morning I have been instructed to mail you the enclosed form.

Enclosed with our Reinstatement Form is a check in the amount of \$308.75 which includes the \$300.00 fee and \$8.75 for a Certificate of Status. We would like to have the late fees waived as we have never received the Annual Return forms. Thank you for your help in this matter.

Sincerely,



Lee D. Smith
Corporate Secretary
Lawdena Aviation Group Inc.