PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. 04 OCT 12 AM 8:07 FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS DOCUMENT # P03000025434 1. Corporation Name BASS BROS DRYWALL, INC. 6925 NE 5TH PLACE 6/14/34 90288 007 27,50 10117 US 441 3. Mailing Office Address 2. Principal Office Address 10117 US 441 6925 NE 5TH PLACE 90288 001 Suite, Apt. #, etc. Suite, Apt. #, etc. Date Incorporated or Qualified To Do Business in Florida 03/03/2003 City & State City & State El Number Applied For BELLEVIEW, FL OCALA, FL 48-1306941 Not Applicable Zip Country Zip Country \$8.75 Additional Fee required for a Certificate of Status 34420 CERTIFICATE OF STATUS DESIRED 34470 U.S. U.S. 7. Name and Address of Current Registered Agent CATHERINE C. SAUNDERS Street Address (P.O. Box Number is Not Acceptable) 10117 US 441 Suite, Apt. #, Etc. City BELLEVIEW State Zip Code 34420 3R2E081 (01/04) 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. Date 10-05-04 Signature of Registered Agent REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director Titles City / State / Zip PR 6925 NE'5TH PLACE - - -MARK'SAMUEL'BASS' OCALA, FL 34470 ~ OCALA, FL 34470 VP 6925 NE 5TH PLACE MARK SAMUEL BASS SE CATHERINE C. SAUNDERS 10117 US 441 BELLEVIEW, FL 34420 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.

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

10/05/04

352-245-8100

Daytime Phone #

JUSTICE FOR ALL

THE BLAIR BUILDING 1301 NE 14<sup>TH</sup> STREET OCALA, FL 34470 OCALA NO.: 352-732-7001

FAX NO.: 352-732-7066

Attention Incorporation Dept.

Re: Deposited Annual Report Fees on 06-16-04 90288 001 \$43.75 90288 002 \$78.75 90288 001 \$27.50

Department of State Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

Enclosed please find the original and (1) the copy of the Corporation Reinstatement form for Bass Bros Drywall, Inc.

I mailed to be filed with Department of State the Annual Report and the \$150.00 fee on 06-08-04 and it was deposited on 06-16-04 by the Department of State.

Please waive the \$600.00 penalty fee for I never received any rejection letter stating the Annual Report was rejected so it could mot be re-submitted.

Please reinstate Bass Bros Drywall, Inc within 30 days. Thank you in advance for your kind and prompt attention to this matter. Should you have any questions or are in need of further information, please feel free to contact me at the telephone number shown above in the letterhead.

Sincerely yours,

Catherine C. Saunders - AGENT