2004 FOR PROFIT CORPORATION REINSTATEMENT

REINSTATEMENT			_ Deniotate	BAPAIT O.
DOCUMENT # P03000090788  1. Entity Name			REINSTATE	IAIEIA I OG
ALAN ZINDLER AND ASSOCIATES	INC.		4 NOV 23 PM 12: 30	
Principal Place of Business	Mailing Address			
-4242 RABBIT POND-RD	Mailing Address 4242-RABBIT-POND RD	•	SECRETARY OF STATE	· ·
FALLAHASSEE, FL 32309	TAL <del>LAHASSEE, FL 3230</del>	9 T	SECRETARY OF STATE ALLAHASSEE, FLORIDA	4
PC .	<u> </u>			
2. Principal Place of Susiness	3. Mailing Address	·		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		/11232004 REIN-P	CR2E098 (6/04)
City & State	City & State		4. FEI Number	✓ Applied For Not Applicable
Zip Country	Zip	Country	5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name				Registered Agent
ZINDLER, ALAN				<u> </u>
TALLAHASSEE, FL 32309.			s (P.O. Box Number is Not Acceptable	e)
11754 NW LAKE MYSTIC RI	9. <b>Y</b>			
BR15TOL, FL 32321	1	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.				
1 ( 0/ Tu) WIN				
SIGNATURE				
FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.0	oo //		In accordance corporation did	with s. 607.193(2)(b), F.S., the not receive the prior notice.
10. OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFF	ICEDS AND DIRECTORS IN 11
TITLE P	☐ Delete	TITLE		Change  Addition
NAME ZINDLER, ALAN	/ /		1754 NW LAKE M	YSTIC RD
STREET ADDRESS 4242 RABBIT POND RD CITY-ST-ZIP TALLAHASSEE, FL 32309		STREET ADDRESS 3.	PLISTOL, FL 32	321
IITLE S	Delete	TITLE		□ Change □ Addition
NAME ZINDLER, MIKE	//	NAME		
STREET ADDRESS 4242 RABBIT POND RD CITY-ST-ZIP TALLAHASSER, FL 32309			154 NW LORF	
TITLE	☐ Delete	TITLE	K.S70/, E/ 32	-0 -1
NAME	LI Delete	NAME		· Change Addition
STREET ADDRESS GITY-ST-ZIP		STREET ADDRESS		
TITLE		CITY-ST-ZIP		
NAME	☐ Delete	TITLE NAME		· Change Addition
STREET ADDRESS		STREET ADDRESS		
City-St-ZiP		CITY-ST-ZIP		
TITLE NAME	☐ Delete	TITLE NAME	Ennas	Change Addition
STREET ADDRESS		STREET ADDRESS	<b>500043</b> : 11/30/040102:	9018 **150.00
CITY-ST-ZIP		CITY-ST-ZIP		
TITLE NAME	☐ Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		
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 other like empowered.				
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SIGNATURE: SIGNATURE AND THE AND THE DESIGNATION OF SECURIO OF SEC				