


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS		FILED 06 DEC 18 PM 1:48 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # <u>8030001028605</u>					
1. Corporation Name <u>Three Daughters Enterprises, Inc</u>					
2. Principal Office Address <u>6086 14th St W</u> Suite, Apt. #, etc.		3. Mailing Office Address <u>SAME AS PRINCIPAL</u> Suite, Apt. #, etc. <u>6086 14th St. W</u>			
City & State <u>Bradenton FL</u>		City & State <u>BRADENTON, FL.</u>		4. Date Incorporated or Qualified To Do Business in Florida	
Zip <u>34207</u>	Country <u>USA</u>	Zip <u>34207</u>	Country <u>USA</u>	5. FEI Number <u>56-2402475</u>	
				Applied For Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name <u>Charles McCullough</u> <u>700082320047</u>					
Street Address (P.O. Box Number is Not Acceptable) <u>1011 FAIRWAY COVE LANE #105</u>					
Suite, Apt. #, Etc. <u>105</u>					
City <u>BRADENTON</u>				State <u>FL</u>	Zip Code <u>34212</u>
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 _____ Date _____					
REGISTERED AGENT MUST SIGN					
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	<u>Charles McCullough</u>	<u>1011 FAIRWAY COVE LANE #105</u>		<u>Bradenton FL 34212</u>	
Tres	<u>Elizabeth McCullough</u>	<u>1011 FAIRWAY COVE LANE #105</u>		<u>Bradenton FL 34212</u>	
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 contained in Chapter 119, 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: <u>Charles McCullough</u> <u>12/4/06</u> <u>407 466 1138</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

THREE DAUGHTERS ENTERPRISES, INC.  
6086 14TH STREET WEST  
BRADENTON, FLORIDA 34207


DECEMBER 14, 2006

SUBJECT: THREE DAUGHTERS ENTERPRISES, INC.  
REF. NUMBER PO3000102865  
FEI# 56-2402475

TO WHOM IT MAY CONCERN;

PLEASE FIND ENCLOSED CORPORATION REINSTATEMENT FOR THE ABOVE CORPORATION. I AM ASKING THAT THE \$600.00 REINSTATEMENT FEE BE WAIVED AS I NEVER RECEIVED THE ANNUAL REPORT TO FILE FOR YEARS 2005 AND 2006. YOU ARE IN RECEIPT OF THE \$300.00 CHECK FOR ANNUAL REPORT FEE FOR 2005 AND 2006. THANK YOU FOR YOUR TIME IN THIS MATTER.

SINCERELY,

  
CHARLES MCCULLOUGH  
PRESIDENT