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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	SECRETARY OF SLAVE DIVISION OF CONFORMATIONS 06 MAY 26 AM 8: 38
DOCUMENT # P03000157/42 1. Corporation Name Today Screens		
Today Sc		RENISTATEMENT 04-06
2. Principal Office Address 11247 San Jose Blvd. Suite, Apt. #, etc.	3. Mailing Office Address 11247 San Jose 13 Ud. Suite, Apt. #. etc.	CR2E081 (12/05)
#113	#113	Date Incorporated or Qualified     To Do Business in Florida
Jack Sonville, Fl.	Jackson ville, Fl.	<b>5.</b> FEI Number Applied For Not Applicable
Fla. Duval	Fla 20023 Country Ouval	CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent		
Name Erik He	eintein	
Street Address (P.O. Box Number is Not Acceptable) 11247 San Jose (3)vd.		
Suite, Apt. #, Etc. #113		
chy Jacksonville		State Zip Code S2223
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		
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 Directo	
P Erik Heintein	11247 San Jose	Blud: Jacksunville, Fl. 32223
		500076252595 06/18/0601015004_**458.75
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 filling 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:  SIGNATURE:		

Sworn to and subscribed before me, in my presence this B day of May -- A-Florida SAUL CRAFTON Notary Public. In and for the State at Large Notary Public, State of Florida My comm. expires July 26, 2009 No. DD 455100 Notary Public My Commission Expires