PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	PORATI STATEM					DEPART Secretary	of Stat	е		SEC	RETARY	AM 9:38 OF STATE E. FLORIDA	4
DOCUMENT # P04000028369 1. Corporation Name DOWNTOWN LOUNGE, INC.									th	12.	30.87		
2. Principal Office Address - No P.O. Box # 7914 LEOTA LANE Suite, Apt. #, etc.					3. Mailing Office Address 7914 LEOTA LANE Suite, Apt. #, etc.				REINSTATEMENT				
City & State NEW PORT RICHEY, FL					City & State NEW PORT RICHEY, FL				4. Date Incorporated or Qualified To Do Business in Florida 02/04/2004 5. FEI Number Applied For Not Applicable				
^{Zip} 34653	4653 Country USA			^{Zip} 34653		Country USA	-	6. CERTIFICATE OF STATUS PESIDED T			S8.75 Addition to rail Cert	Not Applicable tional Fee required tificate of Status	
7. Name and Address of Current Registered Agent Name MATTHEW P. DAVIS Street Address (P.O. Box Number is Not Acceptable) 7914 LEOTA LANE Suite, Apt. #, Etc. City NEW PORT RICHEY State 34653									The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.				
8. I, being a Signature of Registered A		registere	ed agent o		e named corpo			and accept the o	obligations of secti	on 607.05 Date		603, F.S.	
9. Names a	and Street Ad	dresses	of Each C	officer and	or Director (Flo	rida nonpro	fit corporati	ons must list at l	east 3 directors)				
Titles	Name of Officers and/or Directors					Street Address of Each Officer and/or Director					· c	ity / State / Zip	
PTD S	JAMES N. NOTTE							A LANE A LANE		1		RICHEY	34653 , FL
									30	101	192	<u> </u>	34653
									12/18;	707-2-(nori=-	1806: 024 **1	508.75
													
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #													

BOOTH AND COOK, P.A. ATTORNEYS AT LAW

STEPHEN C. BOOTH
J. HARRIS COOK
COURTNEY S. ISOP

Ridgewood Executive Center 7510 Ridge Road Port Richey, Florida 34668 Telephone: 727/842-9105 Fax: 727/848-7601

December 10, 2007

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

Re: **DOWNTOWN LOUNGE, INC.**

To Whom It May Concern:

Enclosed herein please find the following:

- 1. Corporation Reinstatement completed and signed by the Corporation's President.
- 2. Booth & Cook, P.A. check in the amount of \$1,508.75 representing the reinstatement fee of \$1,500.00 and the fee for the issuance of a Certificate of Status.

Please reinstatement this Corporation and forward to our office the Certificate of Status.

Very truly yours,

ROXANNE BARTZ

Legal Assistant