

APPROVED
AND
FILED

10/2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

06 DEC -1 AM 10:48

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P04000129468

1. Corporation Name

LMG-ELITE DESIGNS, INC.

100082204191
12/01/06--01023--011 **300.00

2. Principal Office Address

20209 MAXIM PARKWAY
Suite, Apt. #, etc.

3. Mailing Office Address

20209 MAXIM PARKWAY
Suite, Apt. #, etc.

CR2E081 (12/05)

City & State

Orlando, Florida

City & State

ORLANDO FLORIDA

Zip

32833

Country

ORANGE

Zip

32833

Country

ORANGE

**4. Date Incorporated or Qualified
To Do Business in Florida**

09/14/2004

5. FEI Number

35-2237628

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

MARK LEWIS GREENWOOD

Street Address (P.O. Box Number is Not Acceptable)

20209 MAXIM PARKWAY

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32833

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**

Mark L. Greenwood

Date

11/23/06

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
PRESIDENT	MARK LEWIS GREENWOOD	20209 MAXIM PARKWAY	ORLANDO, FL 32833
VICE PRESIDENT			
SECRETARY	LINDA SUE GREENWOOD	20209 MAXIM PARKWAY	ORLANDO, FL 32833
TREASURY			

REINSTATEMENT 05-06 12

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:

Mark L. Greenwood

Mark L. Greenwood

Date

11/23/06

Daytime Phone #

(407) 568-0047

292

November 23, 2006

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Attention: Corporation Reinstatement

LMG ELITE DESIGNS, INC. did not receive the annual report notice by mail in the year 2005 due to a contract on the property of 20209 Maxim Parkway, Orlando, Florida 32833. The pending contract fell through and LMG ELITE DESIGNS, INC. returned to the address. Enclosed is a copy of the contract for your review. At this time LMG ELITE DESIGNS, INC. wishes to reinstate the corporation and enclose is a check for \$300.00. I look forward to hearing from you in regards to this matter.

Sincerely,

Linda Sue Greenwood / Sec,

Linda Sue Greenwood
Secretary/Treasurer
LMG ELITE DESIGNS, INC.
20209 Maxim Parkway
Orlando, Florida 32833
(407) 568-0047