## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

REINSTATEMENT	A DEPARTMENT OF STATE Secretary of State VISION OF CORPORATIONS	15 MAR 31 AM 10: 46
DOCUMENT # PO4000157574  1. Corporation Name		ALLAHASSEE, FLORIDA
(%) (%) (%) (%) (%) (%) (%) (%) (%) (%)	nes, Inc.	
2. Principal Office Address - No P.O. Box# 3. Mailing 650 RIV(ERADO 65 Suite, Apt. #, etc.	Office Address  ORIVIERADO  F. etc.	CR2E081 (11/10)
City & State  Tampa, Fl. Tam  Zip Country  33606 USA 3360		4. Date Incorporated or Qualified To Do Business in Florida   18204  5. FEI Number Applied For Not Applicable  3. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
Name  Name  EUEENE RUFFOLO  Street Address (P.O. Box Number is Not Acceptable)  650  RIVIEW DIVE		200271258462 03/31/1501026020 **2250.00
Tampa	FL 33606	
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 Puglin Registered Agent Date Registered Agent Registered Registered Agent Registered Agent Registered R		
9. Names and Street Addresses of Each Officer and/or Director (F	lorida nonprofit corporations must list at least 3	3 directors)
Titles Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PDTS Eugene Ruffolo	650 Riviera	Dr Jampa, F1 33606
REINSTATEM	ENT	S. HAWKES  APR -1 A.M.
ACO(0-20)	5	EXAMINER
	i	
0. E-mail Address: Tedroffolo@mcil,com		
11. 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., and that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under path. I am aware that false information submitted in a document to the Department of State constitutes a third degree eleiony as provided for in a 817,155, F.S.  SIGNATURE:  Daytime Priorie **  Dayt		