

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.


FILED

04 JAN 30 AM 11:42

SECRETARY OF STATE
TALLAHASSEE FLORIDA

REINSTATEMENT 03-04

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P32011

1. Corporation Name
M & J CATTLE COMPANY

2. Principal Office Address 7444 BOTANICA PARKWAY Suite, Apt. #, etc.		3. Mailing Office Address P.O. BOX 2023 Suite, Apt. #, etc.	
City & State SARASOTA, FL		City & State ASHLAND, KY 41105-2023	
Zip 34238	Country SARASOTA	Zip 41105-2023	Country BOYD

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number 31-1313020 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: MORRIS L. GRIFFITHS

Street Address (P.O. Box Number is Not Acceptable): 7444 BOTANICA PARKWAY

Suite, Apt. #, Etc.

City: SARASOTA

State: FL Zip Code: 34238

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: 1/23/04

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
PD	MORRIS L. GRIFFITHS	P.O. BOX 2023	ASHLAND, KY 41105-2023
VD	JANET R. GRIFFITHS	P.O. BOX 2023	ASHALND, KY 41105-2023
- S -	ELIZABETH HALL	P.O. BOX 2023	ASHALND, KY 41105-2023

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 under section 119.07(3)(i), 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:  Date: 1/23/04 Daytime Phone #: (606) 739-5139

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E031 (10/02)

**M & J CATTLE COMPANY
P.O. BOX 2023
ASHLAND, KENTUCKY 41105-2023
(606) 739-5139**

January 23, 2004

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32614-6327

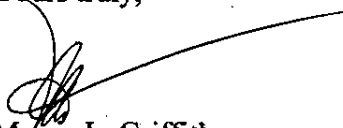
Re: 2003 Annual Filing Report, Record # P32011

We did not receive the Annual Filing Report nor did we receive the second notice.

We are enclosing a check in the amount of \$308.75 to cover the Annual Filing Fee for year 2003 and 2004, plus \$8.75 for a Certificate of Status.

Please waive the late filing and reinstatement fees.

Yours truly,


Morris L. Griffiths
President