
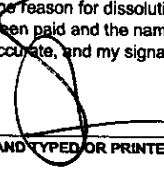


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P39199			
1. Corporation Name Saturn of Mobile, Inc.			
2. Principal Office Address 1431 E I-65 Service Rd		3. Mailing Office Address Same	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Mobile, Alabama		City & State	
Zip 36606	Country USA	Zip	Country
4. Date Incorporated or Qualified To Do Business in Florida 06/10/1992		5. FEI Number 63-1048801	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		Applied For Not Applicable	
		\$8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent			
Name C T Corporation System		300014411503	
Street Address (P.O. Box Number is Not Acceptable) 1200 S. Pine Island Road		03/20/03--01048--011 **300.00	
Suite, Apt. #, Etc.			
City Plantation		State FL	Zip Code 33324
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	
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
CP	Bullard, Joel B.	1151 S. Beltline Hwy	Mobile, Alabama 36606
VP	Williams, Stan	6300 Pensacola Blvd	Pensacola, Florida 32505
S	Tucker, Dennis J.	1151 S. Beltline Hwy	Mobile, Alabama 36606
D	Crawford, Stephen G.	1151 S. Beltline Hwy	Mobile, Alabama 36606
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: 		3-14-03 850 476 8844	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #

FILED

03 MAR 20 AM 10:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CR2E081 (10/02)

3/21

Saturn of Mobile, Inc.
A Joe Bullard Company

Saturn of Mobile
1431 S. Beltline Hwy
Mobile, AL 36606
(251) 471-9999

Saturn of Pensacola
6300 Pensacola Blvd
Pensacola, FL 32505
(850) 476-8844



March 19, 2003

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

RE: Saturn of Mobile, Inc.
Document Number P39199

Dear Sir or Madam:

Please accept the attached corporation reinstatement form completed by Mr. Stan Williams, Vice Pres. for the aforementioned corporation.

Recently we were advised that our status was suspended by the State of Florida and most definitely was a surprise to us. I contacted your office and was advised on the forms needed for submission and reinstatement and was advised by your office that our form was returned to the State and marked undeliverable. I ask that the reinstatement fee be waived since our packet was returned to the State of Florida and accept the enclosed check for \$300.00 to bring us current with our filing requirements.

I appreciate your cooperation in this matter and should you need to contact me please call 850-476-8844.

Sincerely,

A handwritten signature in cursive script that reads "Micheal D. Harris".

Micheal D. Harris
Office Manager