

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 SEP 23 AM 9:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000026123

1. Corporation Name
RONALD LANDRY, P.A.

100008148621--8
-10/02/02--01015--007
***915.00 ***915.00

2. Principal Office Address 5006 TROUBLE CREEK RD. Suite, Apt. #, etc. 114 City & State NEW PORT RICHEY, FL Zip 34652		Country U.S.A.		3. Mailing Office Address 5006 TROUBLE CREEK RD. Suite, Apt. #, etc. 114 City & State NEW PORT RICHEY, FL Zip 34652		Country U.S.A.	
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4. Date Incorporated or Qualified To Do Business in Florida April 9, 1993		5. FEI Number 59-3176618		Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>					

7. Name and Address of Current Registered Agent			
Name RONALD LANDRY			
Street Address (P.O. Box Number is Not Acceptable) 5006 TROUBLE CREEK RD.			
Suite, Apt. #, Etc. 114			
City NEW PORT RICHEY		State FL	Zip Code 34652

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: Ronald Landry Date: 9/16/02

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
D, P, S, T	RONALD LANDRY	11600 SMITH BLVD.	HUDSON, FL 34667

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: Ronald Landry RONALD LANDRY Date: 9/16/02 (727) 863-8291

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (9/01)

Page 2 of 2

BEIL & HAY, P.A.

ATTORNEYS AT LAW
12312 U.S. Highway 19 North, Hudson, Florida 34667
Phone: (727) 868-2306 • Fax: (727) 863-1287

Eugene L. Beil
Cedric P. Hay
Margaret E. Beil

September 17, 2002

DEPARTMENT OF STATE
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: RON LANDRY, P.A.
Reinstatement

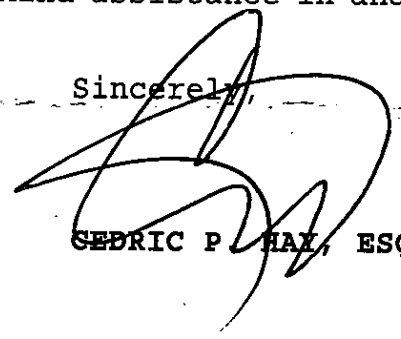
To Whom It May Concern,

Pursuant to my conversation of last week with one of your officers, please consider this correspondence as our formal letter regarding non-delivery of the Uniform Reports for the above-referenced corporation.

I herewith enclose a Reinstatement Application Form (as downloaded from the SUNBIZ website) signed by Mr. Landry in his capacity as both the sole Director and Officer of the corporation and as Registered Agent, which now reflects the current principal office of the corporation. Also enclosed is Mr. Landry's check number 3081, in the amount of \$915.00, which we were informed was the fee for reinstatement.

We thank you for your kind assistance in and attention to this matter.

Sincerely,



CEDRIC P. HAY, ESQ.

CPH/mr
enclosures:
check #3081
Reinstatement Application

