

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

01 JUN -4 PM 5:55

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** P93000082439

1. Corporation Name

E. & M. Investments, Inc.

2. Principal Office Address

1665 Ridgewood Lane

Suite, Apt. #, etc.

City & State

Sarasota, FL

Zip

34231

Country

US

3. Mailing Office Address

1665 Ridgewood Lane

Suite, Apt. #, etc.

City & State

Sarasota, FL

Zip

34231

Country

US

4. Date Incorporated or Qualified  
To Do Business in Florida

12/02/1993

5. FEI Number

650452460

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$9.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

P. Christopher Jaensch

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

2198 Main Street

Suite, Apt. #, Etc.

City

Sarasota

State

FL

Zip Code

34237

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 May 30, 2001

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	Ernest Young	1665 Ridgewood Lane	Sarasota, FL 34231
D	Maureen Young	1665 Ridgewood Lane	Sarasota, FL 34231

REINSTATEMENT 00-01-18

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)(f), 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: Ernest Young

May 30, 2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2001 (2/00)