
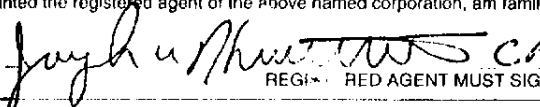


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED -98 JUL 22 PM 2:52 SECRETARY OF STATE TALLAHASSEE, FLORIDA 400002585574--9 -07/10/98--01083--016 *****8.75 *****8.75 400002585574--9 -07/10/98--01083--015 ***1200.00 ***1200.00	
DOCUMENT # 204000004818					
1. Corporation Name Sam Sawyers, Inc.					
Principal Place of Business 7201 W. Franklin Road Boise, ID 33709		Mailing Address			
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable Same as above		3. New Mailing Office Address, If Applicable 5172 N. Watersedge		4. Date Incorporated or Qualified To Do Business in Florida 01-01-94	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 59-3220099	
City & State		City & State Boise, ID		Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
Zip 83703		Country U.S.A.		6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
1	2	3	4		
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip		
Pres	Erica Sawyers	5172 N. Watersedge	Boise, ID 83703		
VP	Sam Sawyers	5172 N. Watersedge	Boise, ID 83703		
Tres	Erica Sawyers	5172 N. Watersedge	Boise, ID 83703		
Sec	Sam Sawyers	5172 N. Watersedge	Boise, ID 83703		
8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent			
Erica Sawyers 5172 N. Watersedge Boise, ID 83703		Name Joe Hometchko, CPA			
		Street Address (P.O. Box Number is Not Acceptable) 1206 COURT STREET			
		Suite, Apt. #, Etc.			
		City CLEARWATER			
		State FL		Zip Code 33756	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.					
Signature of Registered Agent  REG-RED AGENT MUST SIGN		Date 6-30-98			
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (See other side for information on intangible tax.)					
12. 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: Erica Sawyers SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		6-18-98 (208) 376-4000 Date Daytime Phone #			