PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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	RPORAT	Control of Later of	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS			STATE	FILED 04 MAY -3 PM 12: 08			
REIN	STATEM	IENT								
DOCUMENT # P940002840							SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Cent	tral F	lorida Motor	cs, Inc	•						
	al Office Addr W. Pr	ess inston St.	3. Mailing Office Address 977 Summer Lakes Drive			rive	7°00 186°	Paterse	a os	' nzaH
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			T.	4. Date Incorporated or Qualified To Do Business in Florida 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2			
City & State Wint	ter Pa	rk,	City & State Orlando, Fl				5. FEI Number		/18/	Applied For Not Applicable
^{zip} 3280	^{Zip} 32802 Country orange				Country		6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status			
<u></u>	Name		7. N	ame and	Address of Curre	nt Registered	f Agent		- 1	
	Thomas P. Beecher Street Address (P.O. Box Number is Not Acceptable) 977 Summer Lakes Drive Suite, Apt. #, Etc.							2003525 /0401052	023	**300.00
	City	Orlando					State Zip Code FL 32835			
8. I, being	appointed th	e registered agent of the abo	we named corpo	ration, am	familiar with and a	ccept the obli	gations of section	on 607.0505 or 617.0503	, F.S.	
Signature of Registered Agent							Date			
9. Names	s and Street A	Addresses of Each Officer and	d/or Director (Ro	rida nonpr	ofit corporations m	ust list at lear	st 3 directors)			
Titles	Name of Officers and/or Directors			Street Address of Each Officer and/or Director			City / State / Zip			
P	Tho	mas P. Beech	ner	977	Summer	Lakes	Drive	Orlando,	F1	32835
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		1 1120								· · · · · · · · · · · · · · · · · · ·
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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: SIGNADURE AND Y THEO OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

To Whom It May Concern:

April 26,2004

Last year we (Central Florida Motors, Inc.) sent a check in #5126 for the amount of \$300.00 to the Division of Corporations dated March 14, 2003. You apparently did not receive the check and we did not get it back. We called and spoke to a lady at the Division of Corporations and she told us to write a letter stating the situation and to send in a check for \$300.00 to reinstate us for the 2004-2005 year.

Thank you,

Thomas P. Beecher