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CORPORATION THE ME TO THE TO THE ME		PARTMENT OF STATE nering flattes etan of State	R	FILED	•	
DAISION OF CORPORATIONS			00 .	00 JUN 14 AM 8:28		
DOCUMENT # 794000037071 1. Corporation Name			SECR TALLA	SECRETARY OF STATE TALLAHASSEE FLORIDA		
Coastal Printing	y Services, I	Ac.				
				7000033256978		
2. Principal Office Address			-07/18/0001007003 ****308.75 ****308.75			
9202 Panama City Bo Suite, Apt. #, etc.	each Pkwy Suite, Apl. #, etc.	SAME	<u>_</u>			
<u>. –</u> ′			4. Date Incorporated or Qualification To Do Business in Florida	fied May 1	3, 1994	
City & State Panama City Reach, F	City & State		5. FEI Number 59-3243		Applied For Not Applicable	
Zip Country 32407 U.S.A.	Žip	Country	6. CERTIFICATE OF STATUS DES	\$8.75 Additio	onal Fee required	
	7. Name a	and Address of Current Reg	ristered Agent			
Name Brende	R. Bruso	٠			7	
Street Address (P.O. Box Num	ber is Not Acceptable)		1 314			
Suite, Apt. #, Etc.	Panama City	Beach Pk	wg.			
City Day	City Beach	,		Code 2 407	-	
8. I, being appointed the registered agent of				// 		
Signature of Registered Agent	R. Depor	MUST SIGN		6/12/00		
9. Names and Street Addresses of Each Of	ficer and/or Director (Florida no	onprofit corporations must list	at least 3 directors)			
Titles Name of Officers and/or D		Street Address of Officer and/or Dir	Each ector	City / State / Zip		
Pres. Brenda R. Bri	450n 920	o2 Panama Cita	Beach Pkuy Pana	ma City Rea	32407 ch FL	
			J*************************************		, -	
					VE	
10. I certify that I am an officer or director or it	the receiver or trustee empowe	ered 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 owed by the corporation have been paid a	for dissolution has been elimin	nated, the corporate name sati	isfies the requirements of section 607.0	0401 or 617 0401, F.S., t	that all fees	

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Brende R. Bruson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

6/12/00





9202 Panama City Beach Pkwy. Panama City Beach, FL 32407-4022 Telephone 850/233-0509 Facsimile 850/233-0980

June 12, 2000

Florida Department of State Katherine Harris Secretary of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Dear Ms. Harris,

This letter is in regards to reinstatement of my corporation status. I would appreciate consideration for adjusting the fee for reinstatement. I relocated my company November, 1997 and filed my Annual Report in February, 1998. I should have made the necessary change of address on the form, but I did not keep a copy to verify this. Evidently my change of address had expired with the post office when the 1999 Annual Reports were mailed out and it wasn't forwarded to me.

When I discovered your department had the corporation listed as inactive I called your office on June 7th and spoke to a person by the name Isellers. She said possibly consideration could be given due to the circumstances. I'm enclosing \$300.00 for reinstatement and \$8.75 fee for Certificate of Status. If this consideration isn't given, please have someone to contact me.

Sincerely,

Brenda R. Bryson

President