

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

9-26-94

5. FEI Number

CQ-1009580

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒59.75 Additional Fee Required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Dr. Micheal Rowe

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

5121 EHRICH RD.

Suite, Apt. #, Etc.

Suite 110

City

TAMPA

State

FL

Zip Code

33624

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

Michael W. Rowe

Date

8/20/02

REGISTERED AGENT MUST SIGN

8. 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
President	Micheal Rowe	5121 EHRICH RD Suite 110.	TAMPA / FL. / 33624

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Micheal W. Rowe

Date

8/20/02

Daytime Phone #

813-968-9641

ALL APPLICATIONS NOT COMPLETED IN ACCORDANCE WITH THESE INSTRUCTIONS WILL
BE RETURNED FOR CORRECTION(S). PLEASE READ ALL INSTRUCTIONS CAREFULLY.

INSTRUCTIONS FOR COMPLETING THE REINSTATEMENT APPLICATION