PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION PREINSTATEMENT

FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000008766

1. Corporation Name

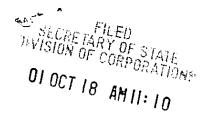
CONSULTING CONTRACTORS, INC.

Principal	Place of	Business

Mailing Address

1313 DIVOT IN

1912 DIVOT IN





TAMPA FL 33612 TAMPA FL 3361					!				
		4.7				,			
If above a	addresses are	incorrect in any way, line the	rough incorrect i	nformation a	and enter correction below.				
		Address, If Applicable	3. New Mail	ing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida —01/27/1995			
Suite, Apt.	#, etc.	· · · ·	Suite, Apt. #,	etc.		5. FEI Numbe	5. FEI Number Applied For		
City & State	8		City & State				59-3339945	Not Applicable	
Zip		Country	Zip		Country	6. CERTIFICATI		75 Additional Fee required or a Certificate of Status	
7. Names	and Street Ad	dresses of Each Officer and	d/or Director (Flo	rida nonprot	fit corporations must list at lea	ast 3 directors)			
Title(s)	2	Name of Officers and/or Directors		3	Street Address of Eacl Officer and/or Director		City / St	ate / Zip	
D	WILLIAMS,	GUY A		1313 DIV	OT LN		TAMPA FL 33612		
						81	00004659 10/30/01 -0 ****150.00	5783 1077-011 ****150.00	
	8 Nam	e and Address of Current	Decistered Ace			0. Name and		1 Jahr	
	O. 14a111	a and Address of Current	negistered Age	भार	Name	9. Name and A	Address of New Registered A	Agent	
14/01 1 1 4 4	10 00000	D17 I			- Name		يد . حيث		
	as, gregoi Uth orego				Street Address (F	O. Box Number	is Not Acceptable)		
TAMPA	FL 33606				Suite, Apt. #, Etc.		11-1-2-11-		
					City		State FL	Zip Code	
10. I, being		e registered agent of the ab	ove named corpo	ration, am fa	amiliar with and accept the ol	bligations of Secti	on 607.0505, F.S.		
Registered Agent REGISTERED AGENT MUST SIGN					Date	<u> </u>			
this reins	statement app	fficer or director or the rece	olution has been	npowered to	execute this application as p	rovided for in cha the requirements	pter 607 or 617, F.S. I further of section 607.0401 or 617.04	certify that when filing 01, F.S., that all fees	

en 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.

Sept 14, 2001

Consulting Contractor

1313 Divot In.

TRa F1. 33612

Florida Dept of State Division of Corporations

ਲ ਦਵਾਲੇ

as instructed by your office I write this letter.

Consulting Contractors, Inc did mot receive the January 1,2001 motice for annual/uniform business report. Consulting Contractors, Inc. did not receive the May 1,2001 motice for an annual report/uniform business report to maintain an active status. Please accept this letter of explanation along with the fee enclosed.

We thank you for your consideration.

DOCUMENT #
P9500008766