

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

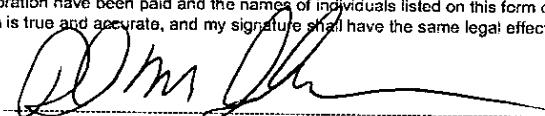
CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # P95000041621		
1. Corporation Name MDPJ, Inc.		
2. Principal Office Address 516 Dracena Way		3. Mailing Office Address Same
Suite, Apt. #, etc.		Suite, Apt. #, etc.
City & State Gulf Breeze, FL		City & State
Zip 32561	Country	Zip Country

4. Date Incorporated or Qualified To Do Business in Florida		05/06/1995
5. FEI Number 59-3330579		Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status		
7. Name and Address of Current Registered Agent  Name David Johnson Street Address (P.O. Box Number is Not Acceptable) 516 Dracena Way Suite, Apt. #, Etc. City Gulf Breeze State FL Zip Code 32561		

8. 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		Date	
REGISTERED AGENT MUST SIGN			
9. 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
PD	David Johnson	516 Dracena Way	Gulf Breeze, FL 32561

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.

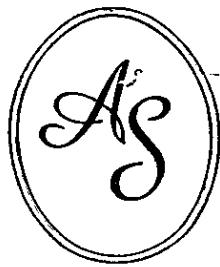
SIGNATURE:



SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/17/11 550-934-9075  
Date Daytime Phone #

CR2E081 (8/01)



Ann Sears. P.A.

Attorney at Law

October 18, 2002

Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

RE: MDPJ, Inc.

Dear Sir or Madam:

On October 4, 2002, MDPJ, Inc. (Document Number P95000041621) was dissolved. Mr. David Johnson, the sole officer and shareholder, had not mailed in the annual report due to the fact that he had not received the annual report. Florida sent the annual report to 3843 W. Madura Road, Golf Breeze, Florida and the report was not forwarded to him. Mr. Johnson has not been in this address for over year to half.

On October 17, 2002, Mr. Johnson called the Secretary of State's office concerning the dissolution of the corporation. The department told him to file a reinstatement and submit \$150 to reinstate the corporation. We have enclosed both for this purpose.

If anything else is needed, please do not hesitate to contact us.

Sincerely,

Ann Sears  
Ann Sears, P.A.