PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P96000026259**

1. Corporation Name

DIAMOND EDUCATIONAL PRODUCTIONS, INC.

Principal Place of Business

Mailing Address

208 SEA ISLAND DR
PONTE VEDRA BEACH FL 32082

208 SEA ISLAND DR

PONTE VEDRA BEACH FL 32082

FILED 03 OCT 17 PM 2744

SECRETARY OF STATE TALLAHASSEE. FLORIDA

							BEINSTATISMICALL OT			
If above a	ddresses are	incorrect in any way, line th	rough incorrect i	nformation a	ınd enter	correction below.	The street to	A STATE OF THE STA		
	Address, If Applicable	ling Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida 03/20/1996					
Suite, Apt. #, etc. Suite, Apt.				, etc.			5. FEI Number Applied For			
City & State City & St				te				59-3401319	Not Applicable	
Zip Country Zip				Country			6. CERTIFICATE OF STATUS DESIRED Control of Status			
7. Names a	and Street Ad	dresses of Each Officer and	I/or Director (Flo	rida nonprof	it corpora	ations must list at le	east 3 directors)			
Title(s)	le(s) Name of Officers and/or Directors			Street Address of Each Officer and/or Director				City / State / Zip		
DP	DIAMOND, ELLEN			208 SEA ISLAND DR				PONTE VEDRA BEACH FL 32082		
DV	CLEMENTS, STEVEN				208 SEA ISLAND DR			PONTE VEDRA BEACH FL 32082		
					300023905043 10/17/0301052004 **158.75					
					-				,	
8. Name and Address of Current Registered Agent							9. Name and	Address of New Registered	l Agent	
DIAMOND, ELLEN						Name				
208 SE	DRIVE	Ì		Street Address (P.O. Box Number is Not Acceptable)						
PONTE VEDRA BEACH FL 32082					Suite		Etc.			
						City	State Zip Code			
10. I, being	appointed the	egistered agent of the ab	ove named corpo	oration, am f	amiliar w	ith and accept the o	obligations of Sec	tion 607.0505, F.S. or 617.05	05, F.S.	
Signature o Registered		Ellin K	LAU IEGISTERED AG	SENT MUST	SJGN			Date _/0 -13-0	13	

11. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DIAMOND EDUCATIONAL PRODUCTIONS

208 SEA ISLAND DRIVE

PONTE VEDRA BEACH, FL 32082

TELEPHONE (904) 280-9314 FAX (904) 280-9124

Oct. 14, 2003

Dear Sir:

As per my conversation with a representative on the telephone, I was told to write this letter.

I never received any notice to file for my "for profit" corporation, and was not aware of it until I received the notice of administrative dissolution or revocation.

Your representative told me to remit a check for \$150 plus \$8.75 for additional fee required for a certificate of status for a total of \$158.75.

Enclosed is the check for that amount.

Sincerely,

Ellen Diamond, President