PLEASE READ	ALL INST	RUCTIONS	BEFORE C	OMPLET	ING THIS FORM	L
ABRLIGATION	ELORID.	A DEPARTME	NT OF STATE		FILED	
UHRN2		Sandra B. Mor			98 NOV 19 PH 3	
REINSTRUMENT	<i>7</i>	Secretary of S IVISION OF CORPOR			SECORTAR	: 52
DOCUMENT # P96000033243		3		SECRETARY OF STATE TALLAHASSEE, FLORIDA		ATE RIDA
BANDIT BAIL BONDS, INC.						
Principal Place of Business	pal Place of Business Mailing Address			1 +00010001 +1	i de le composition de la composition	u kisii mansa saa anka
136 MONTANA AVENUE 136 MONTANA ST. CLOUD FL 34769 ST. CLOUD F						
If above addresses are incorrect in any way, line through incorrect information and enter correction below.				ļ		
New Principal Office Address, If Applicable      i 3. New Mailing Office Address, If Applicable				Date Incorporated or Qualified     To Do Business in Florida		
Suite, Apt. #, etc. Suite, Apt. #,		etc.		04/12/1996		
Live spale Neptune Rd	3249 City & State	Edsel A	ш	J. TET NUMBER	59-3385299	Applied For Not Applicable
Zip Country	Zip Cip	OUC + 1	<del>,</del>	6.	\$8.75 Ac	iditional Fee required
34769 USA	347	13.53	<u> </u>	<u></u>	for a C	ertificate of Status
7. Names and Street Addresses of Each Officer an Name of Officers	J/or Director (Flo	Stre	et Address of Each	<del></del>		
Title(s) and/or Directors 1 2		Officer and/or Director 3 (Do NOT Use Post Office Box Nur		umbers)	City / State / 2	<u> </u>
D TERRAN, M. JUNE		136 MONTANA AVENUE			ST. CLOUD FL 34769	
						ļ
			8000026994188 -12/01/9801079025 ± -****150.00 ****150.00 -			
					10	
				16/11/23		
		 			P	
8. Name and Address of Current Registered Agent Name				9. Name and Address of New Registered Agent		
TEDDAN M. MAIT				A Bay Number	la Not Apportable)	CR2E040 (9/98)
136/MONTANA AVENUE - Wrong Address as 9t. cloud.fl 34769 of 11/97			Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, Etc.			
						°
•	•		City		State Zip	Code
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.  Signature of Registered Agent Duta Duta REQUIRED  Date //-///- 98						
REGISTERED AGENT MUST SIGN						
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)						
12. 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 filling 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  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date Daytime Phone #						

## BANDIT BAIL BONDS

4121 Neptune Road + St. Cloud, Fl + 34769 Office (407) 957-1674 Fax (407) 957-4337

November 16, 1998

Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314-6327

Attention: Leslie

Dear Leslie,

I received a notice of cancellation of my corporation because I was not renewed. I moved November, 1997 and my mail was never forwarded to my new address. Please re-instate me for \$150.00 and not \$600.00. This will not happen again.

Thank∧you,

June Terrian Bandit Bail Bonds