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## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

Mark State				* .	
CORPORATION REINSTATEMENT			Æ	FILED 02 MAR 25 AM 11: 13	
DOCUMENT # P 96000046525  1. Corporation Name			SECRETARY OF STATE TALLAHASSEE, FLORES		
SPANOLA ENTERPRISES, INC.					
2. Principal Office Address	3. Mailing Office Address			01-02	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			4. Date Incorporated or Qualified To Do Business in Florida	
MAITLAND FL City & State			5. FEI Number 5 9 3 3	DUTTE S / TITO	
Zip Country 32751 U.S. A.	Zip	Country	6.	E OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name       Michael A. Spanola         Street Address (P.O. Box Number is Not Acceptable)       40005281614         1945       HEWETT CANE       -04/16/0201027-020         Suite, Apt. #, Etc.       *****300.00       *****300.00					
City MATTLANO				State Zip Code 72751	
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 3/6/0 Z  REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer an	d/or Director (Florida nonpr	rofit corporations must i	ist at least 3 directors)		
Titles Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zip	
P MICHAEL A SPANOCI	A 1945	HEWETT LAN	IE MATTER	MAITLAND FL 32751	
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 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:  MICHARIC A.SPANOLA  3/6/2  (407) 947-9341					
SIGNATURE: MICHAEL ASPANOLA 3/6/62 (401) 1413-14341  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Daytime Phone #					

## Spanola Enterprises, Inc. 1945 Hewett Lane Maitland, FL 32751

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

RE: Renewal of the Uniform Business Report for Spanola Enterprises.

Document # P96000046525 FEI # 59-3381414

Dear Sir or Madam,

Due to a relocation of the business the 2001 Report was not received and there for not filed in accordance with the Department of State in time for the corporation to stay in affect. Also the letter, stating that the corporation was going to be dissolved if the report was not filed was not received. In the past I have kept up with all of the previous reports and wish to have my corporation re-instated. I understand the importance of the documents and hope that this letter will be sufficient to reinstate my corporation.

I have enclosed both the fees for the 2001 and 2002 Uniform Business Report, as well as the new and current address for Spanola Enterprises, Inc.

Very Truly Yours,

Michael A. Spanola, Chief Executive Officer

Spanola Enterprises, Inc.

Spanola Enterprises Inc. 1945 Hewett Lane Maitland, FL 32751

Business phone: 407-947-9341