

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 98-99-12 947000028653			
1. Corporation Name Samples Of Naples, Inc.			
Principal Place of Business 1170 Third Street S. Unit B-105 Naples, FL 34102		Mailing Address 1170 Third Street S. Unit B-105 Naples, FL 34102	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.			
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country	
4. Date Incorporated or Qualified To Do Business in Florida 3/31/97		5. FEI Number 06-1428409	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>		Applied For Not Applicable	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)		\$8.75 Additional Fee required for a Certificate of Status	
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
D	Agnes K. Jansen	1170 Third St. S., #B105	Naples, FL 34102
D	John Ingram	1170 Third St. S., #B105	Naples, FL 34102
D	Marvin Bell	1170 Third St. S., #B105	Naples, FL 34102
D	Lake Jansen	1170 Third St. S., #B105	Naples, FL 34102
8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
		Name Agnes K. Jansen Street Address (P.O. Box Number is Not Acceptable) 1170 Third Street S. Suite, Apt. #, Etc. B-105 City Naples State FL Zip Code 34102	
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 Agnes K. Jansen Date 2/3/99 REGISTERED AGENT MUST SIGN			
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (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 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: Agnes K. Jansen SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Agnes K. Jansen, Director		2/3/99 941-403-7995 Date Daytime Phone #	

4/3

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ATTORNEYS AT LAW

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A. ALBTON FISHER, JR.
OF COUNSEL

February 3, 1999

BOND, SCHOENECK & KING, LLP

ALBANY, NEW YORK

BUFFALO, NEW YORK

OSWEGO, NEW YORK

SARATOGA SPRINGS, NEW YORK

SYRACUSE, NEW YORK

OVERLAND PARK, KANSAS

Via Overnight Delivery

Ms. Andrea Mabry
Corporate Filing
CSC Networks
1201 Hays Street
Tallahassee, FL 32301

Re: *Filing Application for Reinstatement*
Samples of Naples, Inc.
Our Account Number 6258A

Dear Andrea:

Enclosed is an Application for Reinstatement for Samples of Naples, Inc., a Florida corporation. The Director of the corporation, Agnes Jansen, spoke with a representative in the Reinstatement Section of the Florida Department of State (the "Department"). She advised the Department that the corporation never received any documents or notice relating to the annual report. The Department told her that, under these circumstances, the reinstatement filing fee would be limited to \$300.00 (instead of \$900.00).

When you file the Application, please stress that the corporation never received notice of the annual report filing requirements and, therefore, the filing fee should only be \$300.00. However, if absolutely necessary, you are authorized to pay the normal filing fee.

Please return the original filed application and the certificate of status to our office via regular mail. We appreciate your assistance in this matter. Please call me if you have any questions.

Very truly yours,

BOND, SCHOENECK & KING, P.A.

By:

William L. Owens
William L. Owens

WLO/sbf
Enclosure



ACCOUNT NO. : 072100000032

REFERENCE : 123530 6258A

AUTHORIZATION :

COST LIMIT : \$ 308.75

ORDER DATE : February 4, 1999

ORDER TIME : 10:05 AM

ORDER NO. : 123530-005

CUSTOMER NO: 6258A

CUSTOMER: William L. Owens, Esq
Bond Schoeneck & King, P.a.
Suite 107
1167 Third Street South
Naples, FL 34102-7098

RESUBMIT

Please give original
confirmation date as file date.

600002764536--9

DOMESTIC FILINGS

NAME: SAMPLES OF NAPLES, INC.

Please see
attached letter!
Thanks

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Cassandra Lamm

EXAMINER'S INITIALS _____