## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.





## P97000029657 **DOCUMENT #**

1. Corporation Name

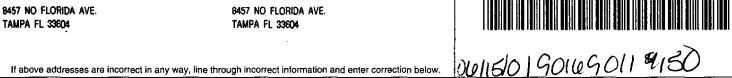
UPTOWN	GROUP,	INC.
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Principal Place of Business

Mailing Address

8457 NO FLORIDA AVE.

FILED 01 NOV -5 AH 10: 05 SECRETARY OF STATE TALLAHASSEE, FLORIDA



If above addresses are incorrect in any way, line through incorrect information and enter correction below.					ששוושט	1701670	11 010	<u> </u>	
			ing Office Address, If Applicable		Date Incorporated or Qualified     To Do Business in Florida     03/31/1997				
Suite, Apt. #, etc. Suite, Apt. #,		, etc.	etc.		· · · · · · · · · · · · · · · · · · ·	<del></del>	Applied For		
City & State City & State					59-3449242		Not Applicable		
Zip		Country	Zip		Country	CERTIFICATE	OF STATUS DESIRED	\$8.75 Addit	tional Fee required tificate of Status
	<u> </u>					<u> </u>			
7. Names	and Street Add	· · · · · · · · · · · · · · · · · · ·	nd/or Director (Flo	orida nonpro	fit corporations must list at le		<del></del>		
Title(s) Name of Officers and/or Directors			Street Address of Each Officer and/or Director		City / State / Zip				
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D	COOK, SPRING 8457		8457 FLC	457 FLORIDA AVENUE		TAMPA FL			
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8. Name and Address of Current Registered Agent					9. Name and Address of New Registered Agent				
					Name Co-	-ing ( - 1/			
TEDROWE, F E ESQ				Spring Cook					
3502 HENDERSON BLVD. STE 300			Street Address (P.O. Box Number is Not Acceptable) 6407 Heathermoor C+			Į.			
	FL 33609				Suite, Apt#, Etc				
17 4000 7 1		_	_ v /=	-	,   - ' <del>- ' •</del> · <del>- '</del>				7,4
					City	,		State Zip C	ode 21
			<del></del>		Tampo	λ		FL 3.	<u> 3637</u>
10. I, being	appointed the	registered agent of the a	bove named corp	oration, am 1	familiar with and accept the o	obligations of Secti	on 607.0505, F.S.		
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Signiture of Registered	of Agent	Du a	100	K			Date _/ 0	J'/-01	<b>/</b>
uečišieien	Ayont		REGISTERED AC	SENT MUST		<del></del>	Date	<u> </u>	

11.1 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.

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## Florida Department of State,

This letter is in reference to Uptown Group, inc. Document # P97000029657. I spoke with Leslie in your office on October 27, 2001 she advised me to write this letter. As I explained to Leslie I was about a week late in sending in my Uniform Business Report so I called and was told they were still processing and to send in my fee of \$150. In which I did. Shortly after I received back a letter informing me of a \$400.00 dollar late fee. I wrote a letter to try to have the late fee reversed. In mid-July you responded to my letter and informed me that the fee could not be waived. I did not know that I had a specific time frame to mail my check. I did not read anywhere a deadline date. A few days ago I received a notice of Administrative Dissolution form I then called and explained the situation to Leslie and am following her advise. She told me to fill out the form and attach this letter and my check for \$400. Please accept this check and my apology. This unfortunate error cost me enough to make sure I am never late again.

Sincerely,

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