FLORIDA DEPARTMENT OF STATE Photoschartis Photosc	Inda
Dixie VIP CLUB INC.	I
2. Principal Office Address 3. Mailing Office Address	
10601 SAN OSE BLVD, SAME	
Suite, Apt. #, etc.	
2/2 To Do Business in Florida 4/2//1997	
City & State	plied For
OACKSON MILE FCA.	Applicable
Zip Country Zip Country 32257 DucaL S8.75 Additional for a Certificate	Fee required e of Status
7. Name and Address of Current Registered Agent	
Name Ross Jensen EDDDDBSSSEIG-	
1055 060003655616- Street Address (P.O. Box Number is Not Acceptable) -02/07/01010280 10601 5m ØSE BLVD.	
Suite, Apt. #, Etc. $\mathcal{A} : \mathcal{Q}$	9 - 1 O
City JACKSONVILLE State Zip Code FL 32257	
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.	(00/6)
Signature of Registered Agent Date Date	25081 (9/00)
Registered Agent Date Date	5
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)	
Name of Officers and /or Directors Street Address of Each Officer and /or Director City / State / Zip	
PRES ROSS JONSEN 10601 SAN JOSE BLUD SACKSWUIKE FRA 3	32257
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 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 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 is owned 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 is on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. SIGNATURE: 	all fees indicated

1/30/01

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1 BRIAN WAYE, DIRECTOR OF DIX'E VIP CULS INC

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