PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM		
CORPORATION REINSTATE LED	FLORIDA DEPARTMENT OF STATE  Jim Smith  Secretary of State  DIVISION OF CORPORATIONS	02 DEC 30 PM 12: 25 SECTION OF STATE CANDA
DOCUMENT #997000038508  1. Corporation Name		
Jump Start	Industrial Inc.	
	·	300009739713 12/30/0201056011 **150.00
2. Principal Office Address	3. Mailing Office Address	
6247 Rock Creeks	3208 BAY DR.	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
		Date Incorporated or Qualified     To Do Business in Florida
City & State	City & State	
Ellentor	Bradenton, FL.	5. FEI Number Applied For Not Applicable
Zip Country	Braden TON, FL.	0
34222 USA	39207 USA	CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
	7. Name and Address of Current Register	ed Agent
Name 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Desemberg, Miltord M. Jr.		
Street Address (P.O. Box Number is Not Acceptable)		
Suite, Apt. #, Etc.		
State Zip Code FL 1 FL 34231		
8. I, being appointed the registered agent of the above named corporation, an familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.  Signature of Registered Agent  REGISTERED AGENT MUST SIGN  Date 23,2008		
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)		
A1	Street Address of Each	
Titles Officers and/or Directors	Officer and/or Director	
D Desambery Milton	1321 N. Lakesi	breDr. Sarasotu FL 34231
D Desemberg, Zite	1321 N. Lakesho	
V.P. Desemberg, Tre	y 3208 Bay D.	r. Bradenton, FL 3423,
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.  941-755-3000  SIGNATURE:  SIGNATURE:  SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Daytime Phone #		

December 24, 2002

Florida Department of State

Dear Sir or Madam:

I was not receiving my mail at the old address. Therefore I did not pay my annual fees for reinstatement. I have changed the address so that in the future I will get my mail. Please accept my apology for not timely sending in the appropriate forms. I enclosing 3 checks in the original amount. If there are any questions the new mailing address will work for receiving all correspondence. If there is any other information needed please call 9417553000 or fax to 87740491000 or email to <a href="mailto:reply@manatee.com">reply@manatee.com</a> or write to 3208 Bay Dr, Bradenton, Florida 34207. Please process as quickly as possible. Have a happy and healthy New Year.

Sincerely,

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