PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION	FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	03 JUL - 1 AM 9: 37 SECRETARY OF STATE TALLAHASSEE, FLORIDA
DOCUMENT # P97000055198		The state of the s
1	Brown, P.A.	
2. Principal Office Address	3. Mailing Office Address 777 ALDERMAN ROAD	100021235021 07/01/0301015011 **600.00
Suite, Apt. #, etc. City & State	Suite, Apt. #, etc. City & State	4. Date Incorporated or Qualified To Do Business in Florida 6/23/1497 5. FEI Number Applied For
PALM HARBOR FL Country	PALM HARBOR FL	59-3455508 Not Applicable
34683 US	34683 US	CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status
Name JEFFREY G. BROWN Street Address (P.O. Box Number is Not Acceptable) 777 ALDER MAN ROAD Suite, Apt. #, Etc.		
City PALM 11.	ARBOR	State Zip Code FL 34683
8. I, being appointed the reflected aport 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 C 20.03 REGISTERED AGENT MUST SIGN		
9. Names and Street Addresses of Each Officer and	for Director (Florida nonprofit corporations must list at lea	ast 3 directors)
Titles Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pld SEFFREY G. BROW	N 2319 ANDALUSIA	WAY N.E ST. PETERSBURG, FL 33704
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 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: SIGNATURE SIGNATURE OF PRINTED NAME OF SIGNING OFFICIAL OR DIJECTOR Date Dayline Phone #		

Florin, Roebig & Walker, P.A.

TRIAL LAWYERS

777 Alderman Road Palm Harbor, FL 34683 (727) 786-5000 Fax: (727) 772-9833 Toll Free: (800) 226-6581

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CHRISTOPHER D. GRAY

ANGELA E. OUTTEN

Board Certified Labor and Employment Lawyer by the Florida Bar

Of Counsel

JEFFREY G. BROWN, P.A.

Board Certified Criminal Trial Lawyer by the Florida Bar and National Board of Trial Advocacy (727) 786-8686

ROBERT D. ECKARD, P.A.

June 25, 2003

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

Re: Jeffrey G. Brown, P.A.

Dear Sir or Madam:

It has recently come to our attention that the above referenced corporation was involuntarily dissolved in a prior year. Please note that the corporation has not received an annual report from the State of Florida and, as a result, has not filed an annual report since 1999.

Enclosed please find a reinstatement application along with a check in the amount of \$600.00 for unpaid annual filing fees.

We respectfully request that any reinstatement fee be waived due to the facts presented above.

Thank you for your cooperation.

Jeffrey C. Brown

JGB/jsv Enclosure