PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.	
APPLICATION FLORIDA DEPARTME Sandra B. Mo	
FUR Secretary of	
REINSTATEMENT DIVISION OF CORPC	Contract Lines In the
DOCUMENT # P970006838	98 AUG 21 PM 2: 56
· Amato and Sons Ir	SECRETARY OF STATE TALLAHASSEL, FLORIDA
You may have it is liked to tary 5. Stand Alfred 50 lesade	na address is wong!
3926 W. Osborne Ave. 3926 W. Ust	9011/e 14ve.
Tampa, FL 33614 Tampa, FL	
If above addresses are incorrect in any way, line through incorrect information and enter  New Principal Office Address, If Applicable  3. New Mailing Office Address, If	Applicable //. Date Incorporated or Qualified
Suite, Apr. #, etc.	5. FEI Number Applied For
City & State City & State Tampa FL	59-3464520 Not Applicable
33614 Country A 21/33614' Country	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
	reet Address of Each
1 2 3 (Do NOT U	(ficer and/or Director see Post Office Box Numbers)  City / State / Zip see Post Office Box Numbers)
P Natale T. Amato 7084 S.	Shore Dr. So. Pasadena, FL 33707
VP Charles Amato "	)1 1/
S Deborah Annato 11	7) 11
per Convertation with Charles Amoto	1000026257112 -08/26/9801077009 ****158.75 ****158.75
8/24 B. AR 98	AR
8. Name and Address of Current Registered Agent	Name and Address of New Registered Agent     Name
Natale Ti Amato	Street Address (P.O. Box Number is Not Acceptable)
7084 S. Shore Dr.	Suite, Apt. #, Etc.
So. Pasadena, FL 33707	
<ol> <li>I, being appointed the registered agent of the above named corporation, am familiar w.</li> </ol> Signature of	th and accept the obligations of Section 607.0505, F.S.
Registered Agont REGISTERED AGENT MUST SIGN	Date
<ol> <li>This corporation owes or has paid the current year Intangible Personal Property tax due June 30.</li> </ol>	Yes No (See other side for information on intangible tax.)
12. I certify that I am an officer or director or the receivor 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: Matale III Com ata 8/1/98 8/3-873-0525	

Amato and Sons Inc. d/b/a Ray's Automotive 3926 W. Osborne Ave. Tampa, FL 33614

August 1, 1998

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Attention Department of State / Division of Corporations,

This is our first year of incorporation status. It has been brought to my attention that we must renew our status each year. I was not quite sure why we did not receive our forms to fill out. I called your office to request the proper forms and the gentleman (thampton) told me he would send them. Please review your information and be sure our address is corrected to the above address on this letter which I have also included on the forms. I have enclosed a check of \$158.75. The additional \$8.75 is for a Certificate of Status, I also want to make sure you have our correct address so we can avoid future problems.

Sincerely,

Deborah J. Amato / Sec.