

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000072421			
1. Corporation Name COLE & SONS, ENTERPRISE, INC.			
Principal Place of Business 1717 WESTERLY DR BRANDON FL 33511 Tampa, FL 33617		Mailing Address 10404 N. Harbors Drive P.O. Box BRANDON FL 33511 Tampa, FL 33680	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.			
2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		4. Date Incorporated or Qualified To Do Business in Florida 08/20/1997	
		5. FEI Number 59-3465186	
		Applied For Not Applicable	
6. CERTIFICATE OF STATUS DESIRED			
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
D	COLE, ARTHUR	1717 WESTERLY DR 10404 N. Harbors Dr.	BRANDON FL 33511 Tampa, FL 33617
8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
MOULING, KATHY L 205 W. MLKING BLVD #204 TAMPA FL 33603		Name Kathy L. Cole Street Address (P.O. Box Number is Not Acceptable) 205 W. M. L. King Blvd. #204 Suite, Apt. #, Etc. City Tampa State FL Zip Code 33603	
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.			
Signature of Registered Agent Kathy L. Cole		Date 10-23-2000	
REGISTERED AGENT MUST SIGN			

11. 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 on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Arthur L. Cole 10-23-2000 339-5886
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

October 20, 2000

Cole & Sons, Enterprise, Inc.
10406 N. Hartts Drive
Tampa, FL. 33617

RE: DOCUMENT #09700072421

Dear Sir:

We did not receive notice to renew the above corporation.

Therefore we are submitting application for reinstatement with the necessary corrections.

Sincerely,

A handwritten signature in cursive script that reads "Arthur L. Cole".

Arthur L. Cole
President