

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P98000024389**

1. Corporation Name

MCDOT'S, INC.

Principal Place of Business

477 SATURIBA DRIVE
ATLANTIC BEACH FL 32233

Mailing Address

477 SATURIBA DRIVE
ATLANTIC BEACH FL 32233

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	4. Date Incorporated or Qualified To Do Business in Florida
Suite, Apt. #, etc.	Suite, Apt. #, etc.	03/13/1998
City & State	City & State	5. FEI Number
Zip	Country	59-3513140
		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	MCGIBANY, RONALD L	477 SATURIBA DRIVE	ATLANTIC BEACH FL 32233
VSTD	MCGIBANY, MARY M	477 SATURIBA DRIVE	ATLANTIC BEACH FL 32233

900004685739--2
-11/16/01-01080-009
***150.00 ***150.00

8. Name and Address of Current Registered Agent

MCGIBANY, RONALD M
477 SATURIBA DRIVE
ATLANTIC BEACH FL 32233

9. Name and Address of New Registered Agent

Name		
Street Address (P.O. Box Number is Not Acceptable)		
Suite, Apt. #, Etc.		
City	State	Zip Code

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

Ronald L. M. McGibany

REGISTERED AGENT MUST SIGN

Date **10/12/01**

CR2E04 (8/01)

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

SIGNATURE: *Ronald L. M. McGibany*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/12/01 904 7235746

Date Daytime Phone #

182
October 12, 2001

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

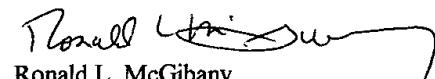
From: Ronald L. McGibany
McDot's, Inc.
477 Saturiba Dr.
Atlantic Beach, FL 32233

Re: Reinstatement

I just received the letter stating that I failed to file the 2001 corporation annual report. Please note that I did not receive any previous forms in the mail stating that this was due and sincerely regret that this was not paid in a timely manner.

Please accept this payment as I was unaware and did not receive anything prior to this.

Sincerely,


Ronald L. McGibany
904246-4187