10/03/2005 15:28 8502221566 CORPORATE ACCESS P5 1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 OCT 10 AM 11:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000029558

REINSTATEMENT 10-05

T. Roberts OCT

1. Corporation Name
Garden City M.O. Holdings, Inc

2. Principal Office Address	3. Mailing Office Address
2770 White Wing Lane	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: W. Palm Beach, Fl.	City & State: Same
Zip: 33405 Country: Palm Beach	Zip: Country:

4. Date Incorporated or Qualified To Do Business In Florida

5. FEI Number ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name: M. O. Simmons

Street Address (P.O. Box Number is Not Acceptable): 2770 White Wing Lane

100006058055
10/13/05--01053--002 **750.00

Suite, Apt. #, Etc.

City: W. Palm Beach, Fl State: FL Zip Code: 33404

8. I, being appointed the registered agent 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: MO Simmons — REGISTERED AGENT MUST SIGN — Date: OCTOBER 5, 2005

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Joe Simmons	2770 White Wing Lane	W. Palm Beach, Fl 33409
Sec	M. O. Simmons	Same	Same
Trea	M. O. Simmons	Same	Same

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: MO Simmons — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Secretary M. O. Simmons — Date: 10/5/05 — Daytime Phone #: (561) 616-9138

Fed Ex
10/10

GARDEN CITY M.O. HOLDINGS, INC.
2770 WHITE WING LANE
WEST PALM BEACH, FLORIDA 33409

TO: Division of Corporations DATE: October 5, 2005

RE: Garden City M.O. Holdings, Inc.

We did not receive the "Annual Report Form" for the above named Corporation. (2002-2005)

Please find enclosed our check for $750.00 to bring us up do date.

Please waive the reinstatement fee.

Sincerely,

Joe Simmons, President