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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.		
CORPORATION	ORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	FILED 02 JUN 28 AM 9: 27 SECRETARY OF STATE 1
DOCUMENT # + 9800039848 1. Corporation Name C. E. COLLINS, TUC 950 5.E. MONTEREY ROSO Studio, FL 3494		SECRETARY OF STATE ' JALLAMASSEE, FLORIDA
2. Principal Office Address 3.	Mailing Office Address Apt. #, etc.	700062508075 -07/08/0201065003
Zip Country Zip	& State Country MARGIN	To Do Business in Florida 5. FEI Number Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City Steel Zip Code		
8. I, being appointed the registered agent of the above named convoration am familiar with and accept the obligations of section 607:0505 or 617.0503, F.S. Signature of Registered Agent Date C/25/200 2 REGISTERED AGENT MUST SIGN		
9. Names and Street Addresses of Each Officer and/or Dir Titles Name of Officers and/or Directors	ector (Florida nonprofit corporations must list at le Street Address of Each Officer and/or Director	0% (0) 17%
P CLARIC COLLIS	890 Cada	on tare Janen Basell Fr. 3495
	01-021	BR HOLL
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. Justiner certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.9401 \$77.0401, 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), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Daytime Phone #		

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C. E. Collins, Inc. 950 S. E. Monterey Road Stuart, FL 34994

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

Re: C. E. Collins, Inc. Federal I. D. #65-0832427

Dear Sir or Madam:

Enclosed is a check in the amount of \$300.00 to be applied to C. E. Collins, Inc. Corporate Annual Report for 2001 & 2002. Also is a reinstatement form with current information.

For the past few years, I have had an accounting firm handling the tax filing for C. E. Collins, Inc. I was not aware the Corporate Annual Report filings had not been done until recently when it was brought to my attention by another accounting firm.

Please note the mailing address has changed. Also, the registered agent address has changed.

Please waive the reinstatement fee.

Sincerely

Clark Collins President