PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT			FLORIDA DEPARAMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS			FILED 00 MAR 13 AM 8: 19						
DOCUMENT # DOCCOOLING							SECRETARY OF STATE TALLAHASSEE, FLORIDA					
Sa	when	n Resour	rae Seni)iees	. Inc.					. 🔊		
2. Principa	al Office Addres		3. Mailing Office	3. Mailing Office Address				1 DETRICTATE APAIT () ()				
7595	S.TAN	ni Ami TRAil	17595S	Ami TRAIL	REINSTATEMENT 9000							
uite, Apt. #			Suite, Apt. #, etc									
Sui	te 20	2	Swite	2	4. Date Incorporated or Qualified To Do Business in Florida							
ity & State		. و	City & State			5. FEI Number ` Applied For						
Font Myers, I/			Fort M						Applicable			
ip 339	08	Country	33908	Co	ountry んとと	6. CERTIFICAT		S DESIDED S8.	75 Additional F for a Certificate	ee required of Status		
***			7. Nan	ne and Addre	ess of Current Register	ed Agent	10. PL T M 10. E		and the state of	. <u>.</u>		
	Rebecca Sanver Street Address (P.O. Box Number is Not Acceptable) 200003182522-3 9233 P; Ne-opple Rd. 200003182522-3 03/24/00-01041-004 Suite, Apt. #, Etc. ****150.00 *****150.00 State Zip Code FL 33912											
I. 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. Date 3-31-00 REGISTERED AGENT MUST SIGN												
Names	and Street Ad	dresses of Each Officer an	d/or Director (Florid	a nonprofit co	prporations must list at lea	ast 3 directors)	<u> </u>					
Titles		Name of Officers and/or Directors	,	Street Address of Each Officer and/or Director				City / State / Zip				
P	JAMES	: # a	2052 Crestview Way			NAP	les., J.1-	34113	2			
vρ	Rober	et L. SARU		9233 Pineapple Rd.			tont	Mycas	41 33°	912		
SIT	Rebe	Leca Saro			Pineapple		_	Myens,				
						20	000 -03, ***	31820 ′24/0001 **750.00		3.00		
this rein owed b	nstatement app by the corporati application is t	fficer or director or the rece dication, the reason for dis- on have been paid and the rue and accurate, and my s	solution has been eli names of individual	minated, the s listed on thi	corporate name satisfies s form do not qualify for a	the requirements an exemption und r oath.	of section (507.0401 or 617.0	401, F.S., that a	all fees		
	SIG	NATURE AND TYPED OR PE	INTED NAME OF SIG	NING OFFICER	OR DIRECTOR		Date	Day	/time Phone #			