

	PLEASI	E READ ALL INS	TRUCTIONS BEFORE	COMPLETING THIS FORM.	
CORPORATION REINSTATEMENT  PAR 100 10 882				FILED 04 JUL 29 PM 1:10	
1. Corporation Name				SECRETARY UN STATE TALLAHASSEE, FLORIDA	
1. Corporation Name  ANNIE'S AUTO BODY, INC.  2293 S.E. BRUNER LANE				THE WILLIAMS SEE, PEURIDA	
FORT MYERS, FL 33912					
	ORT MYERS,	72 35 11 d		HEINSTATEMENT 03-04	
2. Principal Office Address 3. Mailing			Office Address	100039695721 Wo 07/29/0401046002 **308.75	
			m <i>E</i>	07/29/0401046002 **308.75 !	
Suite, Apt. #, etc. Suite, Ap			r, etc.	4. Date Incorporated or Qualified	
City & State		City'& State		To Do Business in Florida 8-10-98	
l	<u></u>			5. FEI Number   Applied For     Not Applicable	
Zip	Country	Zip	Country	CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status	
	<del></del>	7.	Name and Address of Current Regi	<u></u>	
	Name C				
		Street Address (P.O. Box Number is Not Acceptable)			
	2820 EL DORADO PKWY WEST				
	Suite, Apt. #¿Etc.				
_	ChpE	COEAL		State Zip Code S3914	
8. I, being	appointed the registered a	gent of the above named corp	poration, am familiar with and accept th	he obligations of section 607.0505 or 617.0503, F.S.	
Signature of Registered		BEGISTERED A	GENT MUST SIGN	Date	
9. Names	and Street Addresses of		<del></del>	at least 3 directors)	
Titles	s and Street Addresses of Each Officer and/or Director (Fi Name of Officers and/or Directors		Street Address of a Officer and/or Dire	Each City / State / Zie	
P, D	GREG	Suyder	2820 En Doemoo F	KNY WEST CAPE COUNTY IT 33914	
S, T, 1	DEBRA	SNYDER	2820 & DOEADO	PRINY WEST CARE COURL, FI 33914	
1, D	SEAN	SNYDER	130 LOTH TERRA	_ <b>_</b> ا	
				· ·	
				as provided for in chapter 607 or 617, F.S. I further certify that when filling	
owed t	by the corporation have be	en paid and the names of indiv	iduals listed on this form do not qualify	isfies the requirements of section 607.0401 or 617.0401, F.S., that all fees for an exemption under section 119.07(3)(i), F.S. The information indicated	
on this	application is true and ac	iurale, and my signature short	have the same legal effect as if made u	under datif.	

X 7-2/84

SIGNATURE: SIGNATURE AND PIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## 782

## CPA FINANCIAL, P.A.

## Certified Public Accountants & Consultants

William W. Marsland Lawrence Perez Bradley R. Smith, CPA, CVA Sundi Chambers, CPA Location: 27657 Old 41 Road Bonita Springs, Fl 34135

Mailing: PO Box 2507 Bonita Springs, Fl 34133

Phone: (941)-992-4232 Fax: (941)-992-6451

July 16, 2004

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

Re: Reinstatement - Annie's Auto Body, Inc.

To Whom It May Concern:

The officers of the corporation did not receive "Notice" regarding the 2003 Annual Report. Allowing the corporation to be "administratively dissolved" was not intentional. Please waive any penalties associated with this event and reinstate the corporation. Thank you for your attention to this matter.

Respectfully,

Bradley R. Smith, CPA, CVA