


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		APPROVED AND FILED 99 DEC -8 PM 4:48 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # P98000095380 1. Corporation Name BIDX.COM, INC. <i>99 DEC</i> <i>pg 1 of 2</i>					
Principal Place of Business / Mailing Address 5700 S.W. 34th St., Suite 1235 Gainesville, FL 32608 <small>If above addresses are incorrect in any way, line through incorrect information and enter correction below.</small>					
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida 11-9-98 5. FEI Number 59-3550775 Applied For <input checked="" type="checkbox"/> Not Applicable <input type="checkbox"/> 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> <small>\$67.5 additional fee required for a Certificate of Status.</small>	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip		
PTD	James T. McClave	3400 S.W. 34th St., #1235	Gainesville, FL 32608		
VP, SD	Thomas P. Rothrock	3400 S.W. 34th St., #1235	Gainesville, FL 32608		
				200003073252--1 -12/16/99--01095--001 *****150.00 *****150.00	
8. Name and Address of Current Registered Agent Bruce Brashear 926 N.W. 13th St. Gainesville, FL 32601					
9. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ Suite, Apt. #, Etc. _____ City _____ State FL 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 <i>[Signature]</i> Date 12-7-99 REGISTERED AGENT MUST SIGN					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (See other side for information on intangible tax.)					
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: <i>[Signature]</i> James T. McClave 12-7-99 352 375 7624 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

CCE040 (12/95)

BRASHEAR & ASSOCIATES, P.L.
Counselors At Law

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December 7, 1999

BRUCE BRASHEAR
THOMPkins W. WHITE
AMY SINELLI

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

RE: Bidx.com, Inc.
Doc. No. P98000095380

Gentlemen:

Enclosed please find an Application for Reinstatement for the above-referenced corporation, together with a check in the amount of \$150.00 representing Annual Report fees for 1999. The corporation is located in a building that houses a number of businesses. Through inadvertence, the corporation omitted its suite number in the filing and did not receive its Annual Report form. In view of this, the corporation requests that the reinstatement fee of \$600.00 be waived.

Thank you for your consideration, and please advise should you require further information.

Sincerely,

BRASHEAR & ASSOCIATES, P.L.

By: 
Bruce Brashear, Esq.