

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

FILED

01 JAN 30 PM 2:13

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P99000035297

1. Corporation Name

PIERRE'S HOLDING COMPANY, INC.

Principal Place of Business

Mailing Address

~~2972 ALATKA CT LONGWOOD FL 32779~~

~~2972 ALATKA CT LONGWOOD FL 32779~~

Same as place of business

801 N John Young Parkway ORLANDO, FL 32804

If above addresses are incorrect in any way, line through if correct information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

801 N John Young Parkway

801 N John Young Parkway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ORLANDO, FL

City & State

ORL, FL 32804

Zip Country

32804 USA

Zip Country

32804 USA

REINSTATEMENT 00-01

4. Date Incorporated or Qualified To Do Business in Florida

04/15/1999

5. FEI Number

59-3574213

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

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

Table with 4 columns: Title(s), Name of Officers and/or Directors, Street Address of Each Officer and/or Director, City / State / Zip. Entry for PIERRE, GERALD P at 801 N John Young Parkway, ORLANDO, FL 32804.

800003743588--2 -02/20/01--01084--013 *****900.00 *****900.00

8. Name and Address of Current Registered Agent

PIERRE, GERALD P 2972 ALATKA CT LONGWOOD FL 32779

9. Name and Address of New Registered Agent

Name: PIERRE, GERALD P Street Address: 801 N John Young Parkway City: ORLANDO State: FL Zip Code: 32804

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

Handwritten signature and 'SIGNATURE REQUIRED' stamp

Date 01/5/01

11. 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:

Handwritten signature and 'SIGNATURE REQUIRED' stamp

01/05/01

GERALD P. PIERRE

Date

Daytime Phone #

(407) 7189032

CR2E040 (8/00)