PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

|   |   | TILED   |
|---|---|---|
| CORPORATION   | FLORIDA DEPARTMENT OF STATE Secretary of State              | 03 MOA 50 bW 1:38   |
| REINSTATEMENT   | Division of corporations                                    | •   |
| 200 me 11   |   | SECRETARY OF STATE TALLAL'ASSEE, FLORIDA  |
| DOCUMENT# (2) PA9   | 1000058256  |   |
| 1. Corporation Name   | 1 11: 0 -   | .   |
| placing chterprise  | Group of Winter Park, In                                    | ~C.   |
|   |   | - REINSTAL WENT 03  |
| 2. Principal Office Address   | 3. Mailing Office Address                                   | - Reinstal Menio3   |
| 1065. Wymore Ad<br>Suite, Apt. H. etc.  | SAME  |   |
| Suite, Apt. #, etc.   | Suite, Apt. #, etc.   |   |
| Cit. 9 Cit.   |   | 4. Date Incorporated or Qualified To Do Business in Florida  1999                       |
| Winter Rule: Fu   | City & State  | 5. FEI Number Applied For   |
| Zip Country   | Zip Country   | 59-3592406 Not Applicable   |
| 32789 U.S.A.  |   | CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status |
|   | 7. Name and Address of Current Regist                       | ered Agent  |
| Name Wichare  | Schmidt   |   |
| Street Address (P.O. Box Number is Not Acceptable)  220   Kindel DUF  |   |   |
| Suite, Apt. #, Etc.   |   |   |
| City State Zip Code   |   |   |
| State Zip Code FL 32789   |   |   |
| 8. 1, 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.  |   |   |
| Signature of Registered Agent, Date 11/17/03  |   |   |
| NO. 00 100 100 100 100 100 100 100 100 100  | REGISTERED AGENT MUST SIGN                                  |   |
| 7   | nd/or Director (Florida nonprofit corporations must list at |   |
| Titles Name of Officers and/or Director   | Street Address of Ea<br>Officer and/or Direct               |   |
| PSTD Michael Cin  | T 2201 Kinder   | sue Winte Park GL 32789   |
| THOMAS SCAME  | y cel can   | some Winter Page 12 3000  |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   | ,   | }   |
| 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. 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 pames 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: Michael & Schnist 11/17/03 (407)677-620  |   |   |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #   |   |   |



## Sterling Enterprise Group of Winter Park, Inc.

The Finest in Corporate Search

November 17, 2003

To Whom;

On or about July of 2002, I decided to purchase an office building and move my business from 401 W Fairbanks ave, 2<sup>nd</sup> floor Winter Park, FL 32789, to 106 S Wymore Rd Winter Park, FL 32789. Around that time I called the department of corporations and spoke with someone regarding my move, the new address, etc.. (I believe I may have filled out a form but unfortunately have no record)

I have not received anything from the state regarding my annual report and fees, and this is the reason for the recent dissolution. I wish to be reinstated without the \$700 received the proper paperwork. Enclosed you will find a check for \$150 as requested by a representative in your office. Thank you so much for your time and consideration.

Michael E Schmidt

Reg/rds