PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE APPLICATION Katherine Harris **FOR** Secretary of State REINSTATEMENT NO OCT 27 AM 8: 53 P99000071782 **DOCUMENT#** 1. Corporation Name SECRETARY OF STATE TALLAHASSEE, FLORIDA JOHN FLORES MARKETING, INC. Mailing Address Principal Place of Business 1611 OWL RIDGE COURT .1614-OWL RIDGE-COURT APOPKA FL 32712 APOPKA FL 32712 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 2. New Principal Office Address, If Applicable 08/06/1999 Suite, Apt. #, etc. 5. FEI Number Applied For Not Applicable \$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) Street Address of Each Name of Officers City / State / Zip Officer and/or Director and/or Directors Title(s) APOPKA FL 32712 1611 OWL RIDGE COURT **PTS** FLORES, JOHN 200003464602--4 11/15/00--01083--001 ****150.00 ****150.00 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent Name FLORES, JOHN Street Address (P.O. Box Number is Not Acceptable) 1611 OWL RIDGE COURT Suite, Apt. #, Etc. APOPKA FL 32712 Zip Code State City 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 Date 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.

0010512

P O BOX 916573 LONGWOOD, FLA. 32791

JOHN FLORES MARKETING, INC.

October 25, 2000

FLORIDA STATE DEPT. OF CORPORATIONS

Dear Sir or Madam:

I RECEIVED A DOCUMENT OF REINSTATEMENT OF MY CORPORATION, I AM VERY CONFUSED AT WHAT IS GOING ON, I PAID MY ACCOUNTANT TO SET UP AN "S-CORP" AT HIS PROFESSIONAL ADVICE. I NOW FIND OUT FROM A PHONE CALL I MADE TO YOUR DEPT. THAT I OWED \$150. I AM VERY UPSET THAT I DID NOT RECEIVE THIS INFORMATION, BECAUSE THAT IS NOT A PROBLEM, BUT, NOW I FIND OUT THAT I WAS NEVER A CORPORATION AND THAT THE AMOUNT HAS GROWN TO \$750! THAT'S ATHUGE PROBLEM. I AM NOT IN THE FINANCIAL POSITION TO PAY THAT AMOUNT, AND TFEEL THAT I HAVE NOT BEEN INFORMED APPROPRIATELY IN THIS MANNER. PLEASE ALSO BE ADVISED THAT MY BUSINESS ADDRESS IS NOT WHAT YOU HAVE ON YOUR RECORDS, THAT MIGHT BE A REASON FOR NOT RECEIVING THIS INFORMATION IN A TIMELY MANNER. PLEASE USE THE ABOVE ADDRESS FOR FUTURE REFERRANCE. I AM ENCLOSING A CASHIERS CHECK FOR \$150 I HOPE THAT THIS WILL SATISFY THE REQUIREMENTS NEEDED TO BECOME A CORPORATION, AN "S-CORP." I APOLOGIZE FOR ANY INCONVENIENCE ON MY PART, BUT PLEASE KNOW THAT 1 TRY TO DO WHATEVER NECESSARY TO BE IN GOOD STANDINGS AS A TAX PAYER AND AN AMERICAN CITIZEN. I APPRECIATE YOUR PATIENCE AND UNDERSTANDING. THE DOCUMENT NUMBER# P99000071782

Sincerely.

JOHN FLORES OWNER/PRESIDENT

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