PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE **CORPORATION** 04 APR 21 AM 8: 44 Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE. FLORIDA DOCUMENT # P99000081170 1. Corporation Name A' VENTURA DAY SPA SERVICES, INC. RENSTATEMENT 07-04 2. Principal Office Address 3. Mailing Office Address 2750 BAHIA VISTA STREET 2750 BAHIA VISTA STREET Suite, Apt. #, etc. Suite, Apt. #, etc. **SUITE 125** 4. Date Incorporated or Qualified **SUITE 125** To Do Business in Florida 9/14/1999 City & State City & State 5. FEI Number Applied For _SARASOTA, FLORIDA SARASOTA, FLORIDA ---- - 650947950 Not Applicable Zip Country Country \$8.75 Additional Fee required for a Certificate of Status 34239 34239 SARASOTA SARASOTA CERTIFICATE OF STATUS DESIRED 7. Name and Address of Current Registered Agent JOSEPH D. VENTURA, JR <u>80003311599</u>9 Street Address (P.O. Box Number is Not Acceptable) 5020 79TH AVENUE PLAZA E 04/20/04--01025--001 Suite, Apt. #, Etc. City State Zip Code **SARASOTA** 34243 (04/04) 8. I, being appointed the registered a gent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of 4/16/04 Registered Agent REGISTERED AGENT MUST/SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Titles City / State / Zip P/T JOSEPH D. VENTURA, JR 5020 79TH AVENUE PLAZA E SARASOTA, FL. 34243 V/S DONNA N. VENTURA 5020 79TH AVENUE PLAZA E SARASOTA, FL. 34243 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 filling 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:

SISNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

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A' Ventura Day Spa Services Inc. 2750 Bahia Vista Street Suite 125 Sarasota Fl. 34239 (941) 955-4863

Florida Department of State Division of Corporations

RE: 2003 Uniform Business Report P99000081170

To whom it may concern:

The circumstances that have brought this to my attention were when my wife's company was sent the new online renewal card. I went online and find my corporation inactive status. Then called to find out that you have not received my report.

I have checked my records pertaining to filing my business report and found that it was sent in January 2003. I contacted my bank and found that the check had not been cleared. I can only conclude that it was lost in transit.

I am submitting a completed corporation reinstatement form and a check for \$300 for both years as per phone call instructions.

Thanks You, Joseph D. Ventura Jr

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