

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P99000088194			
1. Corporation Name: Garrett-Ellerbe Enterprises, Inc.			
2. Principal Office Address 5631 Pine Hollow Tr.		3. Mailing Office Address P.O. Box 571	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Oviedo, FL		City & State Goldenrod, FL	
Zip 32765	Country USA	Zip 32733	Country USA
4. Date incorporated or Qualified To Do Business in Florida 10/4/99		5. FEI Number 59-3614144	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>		\$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name Teri Ellerbe	500004614535--0
Street Address (P.O. Box Number is Not Acceptable) 2288 Pebblewood Drive	09/27/01--01098--008
Suite, Apt. #, Etc.	***300.00 ***300.00
City Apopka,	State FL
	Zip Code 32703

8. I, 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 X		Date Sept 6, 2001	
REGISTERED AGENT MUST SIGN			
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	Roberta Garrett	P.O. Box 571	Goldenrod, FL 32733
D	Teri Ellerbe	2288 Pebblewood Dr.	Apopka, FL 32703
	201-25-AK		
	10.00 - ARART		LS
	88.75 - ARSUPP		

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 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: Roberta K. Garrett		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	
ROBERTA K. GARRETT		9/6/01 (407) 365-8400	
Date		Daytime Phone #	

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LAW OFFICES
JAMES E. PANICO
PROFESSIONAL ASSOCIATION
111 SOUTH MAITLAND AVENUE, SUITE 100
MAITLAND, FLORIDA 32751-5697

CORPORATION AND BUSINESS LAW
WILLS, ESTATES AND ESTATE PLANNING
REAL PROPERTY LAW

TELEPHONE (407) 647-7200
FAX (407) 647-1420

August 30, 2001

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

Re: Garrett-Ellerbe Enterprises, Inc.

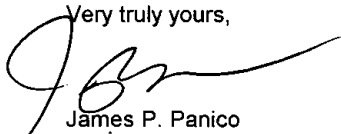
Gentlemen:

Enclosed herewith please find an Application for Reinstatement for the above referenced corporation along with a check in the amount of \$300.00 made payable to the Department of State. Also enclosed please find a letter from a corporate officer acknowledging that the corporation never received the 2000 annual report form and therefore the annual report was never filed.

Please file the enclosed Reinstatement and return confirmation of filing to the corporate address listed on the enclosed Reinstatement.

Thank you for your prompt attention in this matter.

Very truly yours,



James P. Panico

JPP/sar
Enc.

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August 30, 2001

Florida Department of State

Re: Garrett-Ellerbe Enterprises, Inc.

Gentlemen:

This is to advise that that no officer or director of the above referenced corporation ever received the 2000 annual report form for filing. Consequently, we would request that the late fees be waived and that you process our enclosed Reinstatement form.

Thank you for your attention in this matter.

Very truly yours,

By: Roberta K. Garrett
Roberta Garrett

By: Teri Ellerbe
Teri Ellerbe