
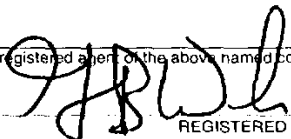


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS 99 JUL 26 AM 11:45	
DOCUMENT # S05449					
1. Corporation Name KETTLES' CONSTRUCTION, INC.					
Principal Place of Business 2401 17th Street S. St. Petersburg, FL 33712-3218		Mailing Address 2401 17th Street S. St. Petersburg, FL 33712-3218			
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida 10/9/90	
				5. FEI Number 59-3032914	
				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)					
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip		
D/P/ S/T	CLAYTON KETTLES	2401 17th Street N.	St. Petersburg, FL 33712		
8. Name and Address of Current Registered Agent CLAYTON KETTLES 2401 17th Street N. St. Petersburg, FL 33712			9. Name and Address of New Registered Agent Name G. BARRY WILKINSON Street Address (P.O. Box Number is Not Acceptable) 696 1st Avenue N. Suite, Apt. #, Etc. Suite 201 City St. Petersburg		
			State FL		
			Zip Code 33701		
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  REGISTERED AGENT MUST SIGN					
Date 7/22/99					
11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (See other side for information on intangible tax.)					
12. 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: Clayton Kettles - As President SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date 7/22/99 Daytime Phone # 895-2424					

CR2ED01 (12/98)

LEFTER, CUSHMAN & WILKINSON, P.A.

ATTORNEYS AND COUNSELORS AT LAW

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G. BARRY WILKINSON
CLANCY V. MENDOZA

OF COUNSEL
THOMAS R. CUSHMAN
ALICE L. CUSHMAN
RICK W. SADORF

July 22, 1999

Department of State
Division of Corporations
Post office Box 6327
Tallahassee, FL 32314

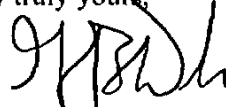
Re: Kettles' Construction, Inc.

Dear Sir or Madam:

Please file the enclosed Application for Reinstatement for the above corporation. My client's check for \$1,800.00 is enclosed to cover the reinstatement fee.

If you have any questions or if there is a problem with the filing, please telephone this office before returning the documents. Your prompt attention to this matter is appreciated.

Very truly yours,



G. Barry Wilkinson

GBW:dt

Enclosures

cc: Clayton Kettles