

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF
Kathleen Harris
Secretary of State
DIVISION OF CORPORATIONS

99-0012

FILED

00 MAY -3 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S79393

1. Corporation Name

Dennis Lee, Incorporated

700003245027--5

-05/09/00--01102--003

****300.00 ****300.00

SP

2. Principal Office Address

715 Tallahassee Dr NE

Suite, Apt. #, etc.

3. Mailing Office Address

715 Tallahassee Dr NE

Suite, Apt. #, etc.

City & State

St. Petersburg, FL

City & State

St. Petersburg, FL

Zip

33702

Country

USA

Zip

33702

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

09/09/91

5. FEI Number

59-3091299

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Lee, Dennis

Street Address (P.O. Box Number is Not Acceptable)

715 Tallahassee Dr NE

Suite, Apt. #, Etc.

City

St. Petersburg

State

FL

Zip Code

33702

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 Dennis Lee

REGISTERED AGENT MUST SIGN

Date

X 5/1/00

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/P	Lee, Dennis	715 Tallahassee Dr NE	St. Petersburg, Florida 33702
D/V/ S/T	Lee, Sandra	715 Tallahassee Dr NE	St. Petersburg, Florida 33702

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: *X Dennis Lee*

Dennis Lee

X 5/1/00

Date

X 727-570-8500

Daytime Phone #

CR2E081 (9/99)

The Dennis Lee Show

May 1, 2000

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

RE: Document # S79393

Dear Stacey:

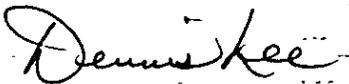
Thank you for your assistance in handling this matter. As we discussed, my 1991 Florida Corporation Form was returned by the U.S. Postal Service to your office. Apparently, your office still has my former accountant's mailing address from 3 years ago on file.

Per your instructions, I have enclosed a check for \$300.00 and a signed reinstatement form for my company, *Dennis Lee, Inc.* Please update your files to reflect my current accountant's address for any future correspondence regarding my company. The address and contact information is as follows:

Thomas R. Whiteman, Jr. P.A.
Certified Public Accountants
5310 Fourth Street North
St. Petersburg, FL 33703
727.896.2727.

Stacey, thank you for your help.

Sincerely,



Dennis Lee
President

Dennis Lee, Inc.
Enclosures