

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION**  
**REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE  
Charles Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 590105

1. Corporation Name  
Komputer Kingdom, Inc.

2. Principal Office Address  
4836 Victor Street  
Suite, Apt. #, etc.  
City & State  
Jacksonville  
Zip Country  
FL Duval

3. Mailing Office Address  
4836 Victor Street  
Suite, Apt. #, etc.  
City & State  
Jacksonville  
Zip Country  
FL Duval

100004733241--5  
-12/19/01--01065--004  
\*\*\*\*150.00 \*\*\*\*150.00

4. Date Incorporated or Qualified  
To Do Business in Florida 12/13/91

5. FEI Number 59-3063198 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  
Glazier & Glazier, PA

Street Address (P.O. Box Number is Not Acceptable)  
8825 Perimeter Park Blvd

Suite, Apt. #, Etc.  
Suite 504

City  
Jacksonville

State Zip Code  
FL 32216

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 Scott L. Glazier, VP Date 11/15/01

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/P/S	Jay B. Davis	4836 Victor Street	Jax FL 32217
D/VP	Thomas F. Brewer	4836 Victor Street	Jax. FL 32217

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 JAY B. DAVIS Date 11/15/2001 Daytime Phone # 730-9946

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



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4836 Victor Street  
Jacksonville, Florida 32207  
Toll Free: 1-800-832-2118  
(904) 730-9940 • Fax: (904) 730-2613  
email: info@kkingdom.com

November 14, 2001

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

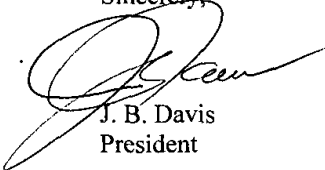
Re: Reinstatement for Komputer Kingdom, Inc.  
59-306-3198

To whom it may concern:

The annual Uniform Business Report for the year 2001 was not received by our corporation. We relocated and all necessary forms were filled out for the United States Post Office and submitted. This form was never forwarded to us. As you can see from our records, these reports have always been timely filed. We would appreciate a waiver of late fees for this reinstatement.

Thank you for your consideration in this matter.

Sincerely,



J. B. Davis  
President