

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION REINSTATEMENT**

**FLORIDA DEPARTMENT OF STATE**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # V05846**

1. Corporation Name  
**CONTEMPORARY CLOSET CONCEPTS, INC.**

2. Principal Office Address  
**8823 VAN FLEET RD.**

3. Mailing Office Address  
**8823 VAN FLEET RD.**

City & State  
**RIVERVIEW, FL**

City & State  
**RIVERVIEW, FL**

Zip Country  
**33569 USA**

Zip Country  
**33569 USA**

**FILED**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**REINSTATEMENT 02-03**

800025939138  
01/02/04--01051--023 \*\*900.00

4. Date Incorporated or Qualified To Do Business in Florida  
**1-10-92**

5. FEI Number  
**65-0304523**

6. CERTIFICATE OF STATUS DESIRED

7. Name and Address of Current Registered Agent

Name  
**GEORGE W. BEATTY**

Street Address (P.O. Box Number is Not Acceptable)  
**8823 VAN FLEET RD.**

Suite, Apt. #, Etc.

City  
**RIVERVIEW**

State  
**FL**

Zip Code  
**33569**

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  
*[Signature]*

REGISTRED AGENT MUST SIGN

Date  
**12-30-03**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PR.S.	GEORGE W. BEATTY	8823 VAN FLEET RD.	RIVERVIEW, FL 33569
SEC.	" "	" "	" " 33569
J.P.	CONSTANCE ANN BEATTY	8823 VAN FLEET RD.	RIVERVIEW, FL 33569

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)(c), 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.

**GEORGE W. BEATTY**

SIGNATURE: *[Signature]*

DATE: **12-30-03**

DAYTIME PHONE: **941-356-6400**

CR2501 (10/02)