


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION
1997 FOR AR



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

1997 OCT 31 PM 2:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000042262

1. Corporation Name
P, INC.

Principal Place of Business Mailing Address

**326 PERUVIAN AVE
PALM BEACH FL 33480** **326 PERUVIAN AVE
PALM BEACH FL 33480**



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

**326 Peruvian Ave
Suite # 1
Palm Beach, Fl.**

4. Date Incorporated or Qualified To Do Business in Florida **05/17/1996**

5. FEI Number Applied For / Not Applicable

65-0665-723 Applied For Not Applicable

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	ESBIA, PATTI	10839 TEA OLIVE LANE	8000A RATON FL 33498 BoCa
			800002349508--0 -11/17/97--01144-015 ****165.00 ****165.00
			SCC 10-31-97

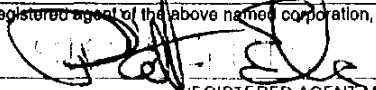
8. Name and Address of Current Registered Agent

**ESBIA, PATTI
326 PERUVIAN AVE
PALM BEACH FL 33480**

9. Name and Address of New Registered Agent

Name _____
Street Address (P.O. Box Number Is Not Acceptable) _____
Suite, Apt. #, Etc. _____
City _____ State **FL** Zip Code _____

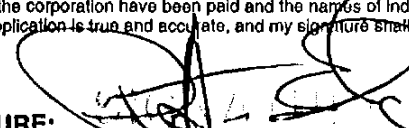
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent  Date **10/28/97**

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (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:  **Patti Esbia** Date **10/28/97** Daytime Phone # **561-833-7448**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E040 (8/97)

2

P. Inc.
D/B/A Patti Esbia Antique & Estate Jewelry
326 Peruvian Avenue
Palm Beach, FL 33480

October 28, 1997

Attached is the application for reinstatement of my corporation.

I have enclosed a check for the amount of \$ 165.00 which is the annual report fee.

This corporation was started 5/17/96. The report that was due in 1997 was not received by me. The Post Office in Palm Beach did not deliver the first notice or the second notice of the annual report. Fortunately, the Post Office did deliver the third final notice.

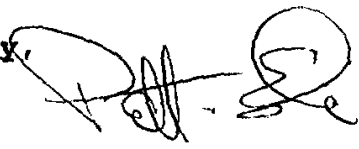
The 1st and 2nd notices were sent back to you.

Please accept this filing as the original filing and not charge the late fees.

Now that I know the filing requirements and the due date of May 1, I will request the annual report form if I do not receive one in the mail.

Thank you for your attention in this matter.

Sincerely,



Patti Esbia, President