

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



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

APPLICATION  
FOR *asale*  
REINSTATEMENT

AND  
FILED

1997 JAN 23 AM 8:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 562386

1. Corporation Name  
AMAR CORP., INC.

Principal Place of Business Mailing Address  
801 N. US #1 801 N. US #1  
JUPITER, FL 33458 JUPITER, FL 33458

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable		3. New Mailing Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 03/20/78	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 59-1810124	
City & State		City & State		Applied For	
Zip		Country		Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/>				\$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
P	ZAINO SR., ANDREW	181 BEACON LANE	JUPITER, FL 33469
V	ZAINO, MARILY	181 BEACON LANE	JUPITER, FL 33469
S	ZAINO JR., ANDREW	181 BEACON LANE	JUPITER, FL 33469
T	ZAINO, ANDREW	181 BEACON LANE	JUPITER, FL 33469
<b>REINSTATEMENT</b> <i>asale 1/23/97</i>			

B. Name and Address of Current Registered Agent

ZAINO, ANDREW, SR.  
181 BEACON LANE  
JUPITER, FL 33469

9. Name and Address of New Registered Agent

Name 100002067431--2  
Street Address (P.O. Box Number is Not Acceptable) 01/24/97 01030-015  
Suite, Apt. #, Etc. \*\*\*\*\*383.75 \*\*\*\*\*383.75  
City 100002067431--2  
-01/24/97 State 01030-015  
\*\*\*\*\*202.50 \*\*\*\*\*202.50

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 *Andrew Zaino, Sr.*  
Andrew Zaino, Sr. REGISTERED AGENT MUST SIGN

Date 1/30

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes  No

(See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: *Andrew Zaino, Sr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 1/30 Daytime Phone #

CR2040 (12/95)