

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

DOCUMENT # F65477

1. Corporation Name
Cedar Enterprises, Inc.

99 MAY 24 PM 1:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
312 S. Old Dixie Hwy. Same
Jupiter, FL 33458
Suite 207

REINSTATEMENT 97-99

If above addresses are incorrect in any way, line through incorrect information and enter correction below.
2. New Principal Office Address, If Applicable 312 S. Old Dixie Hwy.
3. New Mailing Office Address, If Applicable 312 S. Old Dixie Hwy.
Suite, Apt. #, etc. 207 Suite, Apt. #, etc. 207
City & State Jupiter, FL City & State Jupiter, FL
Zip 33458 Country Palm Beach Zip 33458 Country Palm Beach

4. Date Incorporated or Qualified To Do Business in Florida 2-2-82
5. FEI Number 59-2266470

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
P	Jose Ramirez	312 S. Old Dixie Hwy #207	JUPITER, FL 33458
S	Jose Ramirez	312 S Old Dixie Hwy #207	Jupiter, FL 33458

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***1058.75 ***1058.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Zamft Von, Spike
17120 Jupiter Farms Rd.
Jupiter, Fl 33478

Name Jose Ramirez
Street Address (P.O. Box Number is Not Acceptable) 312 S. Old dixie Hwy.
Suite, Apt. #, Etc 207
City JUPITER State FL Zip Code 33458

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 *Jose Ramirez* REGISTERED AGENT MUST SIGN Date 5-19-99

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: *Jose Ramirez*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-19-99 (561) 745-5681
Date Daytime Phone #

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