## PLEASE READ ALL INSTRUCTIONS BEFORE CO

# **APPLICATION** FOR REINSTATEMENT



#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

### DOCUMENT #

J94533

1. Corporation Name

# AMERICAN EXAMINATION SERVICES, INC.

Principal Place of Business

Mailing Address

SIGNATURE:

**FILED** Jan 03 1997 8:00 am Secretary of State

			114 11111111111
		BIAN BIBN BI	
			E11 B186 158

			ISON ST STE 10 ILLE FL 32207-1954						
If above addresses are incorrect in any way, line through incorrect information and enter correction below.  2. New Principal Office Address, If Applicable  3. New Mailing Office Address, If Applicable						Date Incorporated or Qualified			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			To Do Business in Florida 09/23/1987				
Guite, Apr. #, etc.					5. FEI Number 59-2851436		Applied For		
City & State		City & State					Not Applicable		
Zìp	Country	Zip	Count	ry	6. CERTIFICATE	OF STATUS DESIRED S	3.75 Additional Fee required for a Certificate of Status		
7. Names a	and Street Addresses of Each Officer an	d/or Director (Fig				<del>,</del>			
Title(s) Name of Officers and/or Directors			Street Address of Eac Officer and/or Directo 3 (Do NOT Use Post Office Box		n or Numbers)				
D	BURST, TIM J. P.O. BOX 1636			N/A	PONTE VEDRA BCH. FL				
D	D GOLDSTEIN, ALICIA S.			P.O. BOX 1636 N/A		PONTE VEDRA BCH. FL			
<b>.</b>		· · · · · · · · · · · · · · · · · · ·			<u>— 6</u> 1	00002051 -01/08/97 ****375.00	01128001		
	,		Galan						
8. Name and Address of Current Registered Agent  Name  Name						Address of New Registered	1 Agent / (47)		
HIEB, JR. E. ALLEN  1301 GULF LIFE DR  STE 1500				Street Address (P.O. Box Number is Not Acceptable)  +++0/ Emersa Street  Suite. Apt. #. Etc.					
	SONVILLE FL 32207			Suita City Tuck	10 Sonvella	Sta <b>F</b> I	te Zip Code		
10. I, being	appointed the registered agent of the a	bove named corp	pration, am/amiliar w	ith and accept the					
Signature o Registered	Agent	RESISTERED AC	SENT MUST SIGN		, 51 		-01128002		
11.* Do	es this corporation pay pt. of Revenue under S	any intang 3. 199.032,	gible tax to th Florida Stat	ne cutes. Yes	No [	(See other s	side for information angible tax.)		
this rein owed by	that I am an officer or director or the rec statement application, the reason for dis the contration have been paid and the	s <u>clution has</u> beer e names of individ	n eliminated, the corp duals listed on this fo	orate name satistie rm do not qualify fo	s the requirements ir an exemption und	of section 607 0401 or 617.	0401. E.S., that all tees — L.		

9/17/96 904 3963104