

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<p>APPLICATION FOR REINSTATEMENT</p>	<p>FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS</p>	<p>DO NOT WRITE IN THIS SPACE AND FILE 98 JUN 23 AM 11:31</p>
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Read Instructions on Other Side Before Making Entries
Make Check Payable To: Department of State

1. Name and Mailing Address of Corporation: **DOCUMENT # M38408**

TECHNICAL AERO SERVICES, INC.
 1941-N.W.-97th-Avenue
 Miami, -FL-33131

2. If Address in Block 1 is incorrect in any way, enter the correct address below:

Address
 14201 S.W. 142nd Street

City and State
 Miami, Florida 33186

3. If Principle Office Address is different from mailing address, enter address below:

Address
 City and State
 Zip Code

REINSTATEMENT *MA*

4. Date Incorporated or Qualified To Do Business in Florida 9/15/86	5. FEI Number 65-0021723	FEI Number Applied For	6. \$8.75 Additional Fee required for a Certificate of Status <input type="checkbox"/> CERTIFICATE OF STATUS DESIRED
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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/D	Daniel J. Pierson	14201 S.W. 142nd Street	Miami, Florida 33186
V/D	Paul D. Faltyn	14201 S.W. 142nd Street	Miami, Florida 33186
S	Katharine A. Pierson	14201 S.W. 142nd Street	Miami, Florida 33186
T/D	John E. Blickenstaff	14201 S.W. 142nd Street	Miami, Florida 33186

100002576131-2
 -06/30/98-01046-017
 ****300.00 ****300.00
JB 6-23-98

REGISTERED AGENT INFORMATION	9. If changed, new registered agent / office		
8. Name and Address of Current Registered Agent KTG&S Registered Agent Corp. 1401-Brickell-Avenue #700 Miami, -Florida-33131	Name KTG&S Registered Agent Corp.		
	Street Address (Do NOT Use P.O. Box Number) 100 S.E. 2nd Street		
	Street Address (Do NOT Use P.O. Box Number) 28th Floor		
	City Miami	State FL	Zip 33131

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: *Marc Overbeck, V.P.* Date: *6/22/98*
 REGISTERED AGENT MUST SIGN

11. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box (See other side for additional information.)

12. 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.)

13. 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 of Officer or Director: *[Signature]* Date: *6/28/98* Daytime Phone # (305) 254-6777

CR2E040 (8/92)