DI EASE DEAD	ALL INICT		DEEADE (	COMPLETI	NG THIS EODM	
FOR		DA DEPARTMENT OF STAT  Sandra B. Mortham  Secretary of State  DIVISION OF CORPORATIONS		T ADGUCYOLU		
BINGOLO CON CHANGE				98 JUL 2	0 PM 3:59	
DOCUMENT # P9200008597  1. Corporation Name				CEORETAI	FM OF STATE	
FLORIDA KEYS JEWELRY & LOAN, INC				TALLAHAS	FIY OF STATE SEE, FLORIDA	
Principal Place of Business Mailing Address				1		
102991 Overseas Highway Key Largo, F1. 33037				REINST	ATEMENT 01-98	
If above addresses are incorrect in any way, line through incorrect inform  2. New Principal Office Address, If Applicable  3. New Mailing O		Office Address, If Applicable 4.		Date Incorpo     To Do Busine	orated or Qualified ess in Florida 12-2-92	
Suite, Apt. #, etc. Suite, Apt. #, etc.		etc.			To Do Business in Florida 12-2-92  5. FEI Number Applied For	
City & State	City & State		····	65-0372917 Not Applicable		
Zip Country	Zip	Country	,	6. CERTIFICATE	OF STATUS DESIRED 58.75 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)  Name of Officers  Street Address of Each						
			cer and/or Director	r (	City / State / Zip	
P JOEL N ANGEL 2		243 Apa	243 Apache Street		Tavernier, F1. 33070	
S/T LILIAN T. ANGEL		243 Apache Street		eet	Tavernier, F1, 33070	
				70	00025967673	
					-07/23/9801032008 ****900.00 ****900.00	
-					.0	
					02-21 98	
Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent Name			
Gus H. Corwell			LILIAN T. ANGELS  Street Address (P.O. Box Number is Not Acceptable)			
91760 Overseas Highway T <b>a</b> vernier, F1. 33070			102991 Overseas Highway Suite, Apt. #, Etc.			
			City	y Largo,	F1. State Zip Code 33037	
10.11, 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 7/14/98						
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes X 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 filling 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 1/14/98 Daytime Phone # 0177						