

DOCUMENT # P9500008026

Corporation Name

Sharon Miller of Kendall Inc.
1115 Queen Pom Court
Hollywood FL 33015

Principal Place of Business

Mailing Address

Same As Above

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

2. New Principal Office Address, if Applicable
1115 Queen Palm Ct.
Suite, Apt. #, etc.

3. New Mailing Office Address, if Applicable
1115 Queen Palm Ct.
Suite, Apt. #, etc.

City & State
Hollywood, FL.
Zip
33019
Country

City & State
Hollywood, FL.
Zip
33019
Country

4. Date Incorporated or Qualified To Do Business In Florida 01/31/1995

5. FEI Number 65-0561158

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED

7. Name and Street Address 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
	Dir Sharon Miller	1115 Queen Pom Court Queen Palm Court	Hollywood, FL 33015
			100002905291-6 -06/15/99--01074--021 ****150.00 ****150.00
			100002905291-6 -06/15/99--01074--022 ****150.00 ****150.00

8. Name and Address of Current Registered Agent

Matlin Brian

2809 Bird Ave # 124
Miami FL 33133

9. Name and Address of New Registered Agent

Name
George Brito
Street Address (P.O. Box Number is Not Acceptable)
407 Lincoln Rd #5B

Suite, Apt. #, Etc.
City
Miami Beach
State
FL
Zip Code
33139

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0605, F.S.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date 03/26/1999

11. This corporation owes 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)(c), 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

3-15-99

Date

305-534-9292

City/Phone #

resigned
Sharon Miller
4/30/99

FILED

99 MAY 17 AM 11:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten mark]

0

Fla Department of State
Reinstatement for 98-99
FEI 65-0561158

Please accept my check for an additional \$ 150 for reinstatement of my corporation. Check number 1117.
Also enclosed is check 1071. These two checks are for 1998 and 1999

Please note my correct address : **1115 Queen Palm Court**
Hollywood, FL 33019

Please get this into your computers and note that I made address corrections on the reinstatement form.

I had a stickum on the reinstatement form that was returned to me. Since I wasn't quite clear on what it mean I will take a stab at interpreting it. I believe you want me to ask to abade the penalties.

Sharon Miller

*letter # 999A 000
20435*

*Please note
that we never
received the Annual
Report for 1998
Please reinstate
my corp and
please waive
the penalties
Thanks*