

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

APPROVED
 FEB 11 1999

99 FEB - 8 AM 11:27

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # F46828 (2)

1. Corporation Name
REALVEST OF LAUDERDALE, INC.

Principal Place of Business Mailing Address
2101 Corporate Blvd., Suite 107
Boca Raton, FL 33431

REINSTATEMENT *96-99*

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		4. Date Incorporated or Qualified To Do Business in Florida 9/11/1981	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 59-2197711	
City & State		City & State		Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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
D/S/T	Horowitz, Sidney	20596 Links Circle	Boca Raton, FL 33434
D/P	Horowitz, Linda	5 Fir Drive	Kings Point, NY
A/S	Tescher, Donald R.	2101 Corporate Blvd., #107	Boca Raton, FL 33431
			200002777122-- 7 -02/16/99--01067--009 ***1200.00 ***1200.00

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
M & W Agents, Inc. 2101 Corporate Blvd., #107 Boca Raton, FL 33431		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, Etc.	
		City	State Zip Code
			FL

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: *[Signature]* REGISTERED AGENT MUST SIGN Date: **2/5/99** *JB 2-10-99*

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)(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]* Donald R. Tescher, Assistant Secy.
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date: **2/5/99** Daytime Phone #: **561-998-7847**

CR2E081 (12/98)