PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICAT FOR REINSTATE		! !	Sandra E Secreta	RTMENT OF STATE  3. Mortham  ry of State  CORPORATIONS		FILED		
DOCUMENT # K57471								
1. Corporation Name					99 AUG 17 AM 10: 57			
PROFESSIONAL IMPORTS THE "Z" DOCTORS INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business Mailing Address								
2631 Edgewater Drive 2631 Edgewater Drive Orlando, FL 32804 Orlando, FL 32804								
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  1/11/89			
Suite, Apt. #, etc.	Suite, Apt #, etc.			5. FEI Number Applied For				
City & State	City & State			59-2980075 Not Applicable				
Zip	Country	Zip		Country	6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status			
7. Names and Street Ad	dresses of Each Officer and/	or Director (Flo	rida nonprofit					
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director NOT Use Post Office Box N		City / State	/ Zip	
P/S/T/ GAUT, D		2631 Edger		<b>∋</b>	Orlando, FL 3280	)4		
						100002966 -08/23/990 ***1508.75	1111 11006001 ***1508.75	
1	- ĥti	NSTA	TEM	ENT 94-	.99	78 :		
3. Nam	e and Address of Current F	egistered Age	nt	None	9. Name and	Address of New Registered Age	ent	
JOSEPH R. GAUT								
2631 Edgewater Drive Orlando, Florida 32804					Street Address (P.O. Box Number is Not Acceptable)			
				Suite, Apl. #, Etc				
10. I, being appointed the	registered agent of the abov	e named corpor	ration, am far	miliar with and accept the ob	ligations of Sect			
Signature of Registered Agent		)) SISTERED AGE	ENT MUST S	IGN		Date 8/16/90	7	
11. Does this of Dept. of Re	corporation pay a evenue under S.	ny intang 199.032,	ible tax Florida	to the Statutes. Yes [	] No[	(See other side fo on intangibl		
this reinstatement appl owed by the corporation	lication, the reason for dissolution have been paid and the nature and accurate, and my sign	ution has been e tries of individu nature shall have	eliminated, the als listed on t e the same le	e corporate name satisfies the this form do not qualify for a gal effect as if made under to	he requirements in exemption und path.	apter 607 or 617, F.S. I further cert of section 607.0401 or 617.0401, der section 119.07(3)(i), F.S. The	F.S., that all fees information indicated	
SIGNATURE:	NATURE AND PLESO US PAUL	TED NAME OF SH	GNING OFFICE	Joseph R. Gaut,	, Preside	ent 8/16/11 (407)	423-5253	