


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<p>APPLICATION FOR REINSTATEMENT</p> <p>914-97</p>	 <p>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</p>	<p>APPROVED AND FILED</p> <p>97 JAN 21 AM 11:19</p> <p>SECRETARY OF STATE TALLAHASSEE, FLORIDA</p>																			
<p>DOCUMENT # 247745</p> <p>1. Corporation Name Mehanic Corporation</p>		<p>DO NOT WRITE IN THIS SPACE</p> <p>4. Date Incorporated or Qualified To Do Business in Florida 5/24/61</p> <p>5. FEI Number 58-0860809</p> <p>6. <input checked="" type="checkbox"/> CERTIFICATE OF STATUS DEEMED <input type="checkbox"/> SR Fee Additional Fee requested</p>																			
<p>Principal Place of Business 3493 Crompton Rd. Yorktown Heights, N.Y. 10598</p> <p>Mailing Address 727 Central Avenue Scarsdale, N.Y. 10583</p> <p>If above addresses are incorrect in any way, line through incorrect information and enter correction below.</p>																					
<p>2. New Principal Office Address, If Applicable</p> <p>Suite, Apt. #, etc.</p> <p>City & State</p> <p>Zip</p>	<p>3. New Mailing Address, If Applicable</p> <p>Suite, Apt. #, etc.</p> <p>City & State</p> <p>Zip</p> <p>Country</p>																				
<p>7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">Title(s)</th> <th style="width:30%;">Name of Officers and/or Directors</th> <th style="width:30%;">Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)</th> <th style="width:30%;">City / State / Zip</th> </tr> </thead> <tbody> <tr> <td>P/D</td> <td>Bernard F. Curry Jr.</td> <td>50 Inverness Rd.</td> <td>Scarsdale, N.Y. 10583</td> </tr> <tr> <td>T/D</td> <td>Bernard F. Curry III</td> <td>720 Milton Rd. Apt. 1A South</td> <td>Rye, N.Y. 10580</td> </tr> <tr> <td>S/D</td> <td>Lesh Curry-Young</td> <td>4505 Victoria Drive</td> <td>Malisco N.Y. 10549</td> </tr> <tr> <td></td> <td></td> <td></td> <td>800002068118--7 -01/24/97--01087--002 *****8.75 *****8.75</td> </tr> </tbody> </table>			Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip	P/D	Bernard F. Curry Jr.	50 Inverness Rd.	Scarsdale, N.Y. 10583	T/D	Bernard F. Curry III	720 Milton Rd. Apt. 1A South	Rye, N.Y. 10580	S/D	Lesh Curry-Young	4505 Victoria Drive	Malisco N.Y. 10549			
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<p>8. Name and Address of Current Registered Agent</p> <p>CT Corporation System 1200 S. Pine Island Rd. Plantation, FL 33324</p>		<p>9. Name and Address of New Registered Agent</p> <p>Name Street Address (P.O. Box Numbers Not Acceptable) Suite, Apt. #, Etc. City</p> <p>1/21/97 800002068118--7 -01/24/97--01087--003 ****461.25 ****461.25 800002068118--7 -01/24/97--01087--004 ****783.75 ****783.75</p>																			
<p>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.</p> <p>Signature of Registered Agent: <u>Conice Bryan</u> SPECIAL ASSISTANT SECRETARY Date: <u>1-20-97</u></p> <p>REGISTERED AGENT MUST SIGN</p>																					
<p>11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (See other side for information on intangible tax.)</p>																					
<p>12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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.</p>																					
<p>SIGNATURE: <u>Bernard F. Curry, Jr.</u> President 1/15/97 914-723-9200</p> <p>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</p>																					

CR25040 (12/95)