PLEASE HEAD	ALL INSI	HUCTIONS	<u>BEFORE C</u>	OMPLET	NG THIS	ғонм.		
APPLICATION FOR 93~97 REINSTATEMENT	FOR 93-97 Sandra B. Mortha Secretary of Stat			Zerreciviero Ante Falteto				
DOCUMENT # 262721				97 JUN 30 PM 1:26				
West Hollywood Lanes Restaurant, Inc.				SECRETATY CH STATE VALLAMASSEE, FLORIDA				
Principal Place of Business Mailing Address							- 1	
295 South State Road #7 West Hollywood, Florida 33023-6739				REINSTATEMENT <u>93-97</u>				
It above addresses are incorrect in any way, line through incorrect information and enter correction below.						l	A. alan	
2. New Principal Office Address, Il Applicable 10400 Florida Avenue 10400 Florida Avenue			pplicable	4. Date Incorporated or Oualified To Do Business in Florida 09/14/62				
Suite, Apl. #, etc.				5. FEI Number Applied For				
Tampa, Florida				16-0864043 Not Applicable				
Zip 33612 Country US	² 33612		6. CERTIFICATE OF STATUS DESIRED S8.75 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								
Name of Officers and or Directors 3 1 2			e Post Office Box Numbers) 4			Sip		
Pres. Terrence Dobbins 10400 FI			orida Av	enue	Tampa,	Florida	33612	
S/T Edward J. Wodjeski 10400			orida Av	venue Tampa, Florida 33612				
				E	-077	22289 02/97011 1418.75		
8. Name and Address of Current	Registered Age		1	9. Name and	Address of New	Registered Ageni		
Name TBF				9. Name and Address of New Registered Agent WG ^D Utton yiP WG ^D Corporation				
Jack Gellman 800 N.E. 195th Street 200				WG Corporation P.O. Box Number is Not Acceptable) Glades Road				
North Miami Beach, Florida			Suite, Apt. #. Etc. Suite 400			معتبد العتبر العتبر العام ا لخ		
City				Raton, Siale Zio Code FL 33431				
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 By: Registered Agent Date June 26, 1997 Date June 26, 1997								
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No X No X No								
12.1 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.								
	SN June 26, 1997 716-833-4934 BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Date							
Signature and typed on Printed Name of Signing Officer on Director Date Daysime Prone F Terrance Dobbins, President								