PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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Titles Officers and/or Directors Stroot Address of Each Officer and/or Director P Marc Klinger 6331 S.W. 42nd Street Miami, Florida 33155 077/24/07-01031-011 \$\psi 758.75\$ 10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 807 or 817, F.S. I further certify that when filling 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 ross owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The Information indicated on this application to true and occurate, and my signature shall have the same legal affect as if made under oath. 305 - \$3/08.71 SIGNATURE	Signature of Registered Agent Date 7/7/07						
P Marc Klinger 6331 S.W. 42nd Street Miami, Florida 33155 07:/24.07-01031-011 ***758.75 10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 807 or 617, F.S. I further certify that when filling this reinstatement application, the reason for dissolution has been eliminated, the corporate name salisfies the requirements of section 607,0401 or 617,0401, F.S., that il frees owed by the corporation have been paid and the names of inclividuals listed on this form do not qualify for an exemption contained in Chapter 119, F.S. The information indicated on this application is true and gocurator, and my signature shall have the same legal effect as if made under oath. 705 - \$3/0891	9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)						
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