PLEASE READ AL' <u>NSTRUCTIONS BEFORE COMPLETING</u> THIS FORM. APPLICATION FLORIDA DEPARTMENT OF STATE Sandra B. Mortham FILED SEURETARY OF STATE TIVISION OF CORPORATIONS Secretary of State DIVISION OF CORPORATIONS **DOCUMENT #** 01 JUN 19 AM 9:39 Corporation Name Big WHEEL Schwinn, Inc. Principal Place of Business 7029 TAFT ST 7029 TAFFIST Hollywood, Pl 33024 Hollywood, Pl 33024 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 Date Incorporated or Qualified To Do Business in Florida 4/27/1978 Suite, Apt. #, etc. Suite, Apt. #, etc. 5 FEI Number Applied For 59-1858477 City & State City & State Not Applicable \$8.75 Additional Fee required for a Certificate of Status Country Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Name of Officers Title(s) and/or Directors City / State / Zip P.D ANTHONY CHIN PEMBROKE PINES FL 33025 910 SW 88th WAY VP, D SANDRA CHIN PEMBROKE RUES FL 33025 BENDER 9420 NE 9th T, D NADINE MIANI SHORE FL33138 2900 NE 45 th STREET EDMOND CHIN POMPANO BEACH FL 33064 <u>400004458104--5</u> -07/03/01--01059--003 ****300.00 ****300.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent PUTHONY CHIN 910 SW 88 th WAY Street Address (P.O. Box Number is Not Acceptable) PEMBROKE PINES FL 33025 Suite, Apt. #, Etc. City State | Zip Code 10. I, being appointed th e named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent STEREDAGENT MUST SIGN 11. This corporation owes or has paid the current year (See other side for information on intangible tax.) Intangible Personal Property tax due June 30. I certify that I am an officer or director or the receiver or hystee empowered to execute this application as provided for in chapter 607 or 617, 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 fees owed by the corporation have been paid and the names of individuals listed an this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true indiacditate and missignature shall have the same legal effect as if made under oath. 12. I certify that I am an officer or director ANTHONY CHIN 6/13/01 954-966-5545
SIGNING OFFICER OR DIRECTOR

Date Daytime Phone # SIGNATURE:

Sign .

Big Wheel Schwinn, Inc. 7029 Taft St Hollywood, FL 33024

June 13, 2001

Division of Corporations P.O. Box 6327 Tallahassee, Fl 32314

Subject: Big Wheel Schwinn, Inc.

Ref. Number 569585

After reviewing our records we realized we did not receive any notices for the annual report for 1999 or 2000. We had an address change. The reports were most likely returned by the U.S. Postal Service as undeliverable

We have enclosed the reinstatement fee for both 1999 & 2000 in the amount of \$300 per telephone conversation with Division of Corporations. Thank you for waiving any late fees.

Our new address is on the Reinstatement form.

Respectfully Submitted,

Sandra Chin, Director