

Office of State Treasurer Tallahassee, Florida

FOR OFFICIAL USE DATE

NUMBER

01/04/2000

02106

DEBIT MEMORANDUM

To: <u>DEPT. OF STATE</u>

General Revenue Total	0.00	
Trust Total	3,433.75	
Other Total		
Total	\$3,433,75	

\$3,433.75

600003134506

Distribution

Cross	Samas		
Ref	Code	Reason	Amount
012 45 012 45 012 45 012 45 012 45 012 45 012 45 012 45 012 45	5-20-2-130001-45300000-00-000100-00 5-20-2-130001-45300000-00-000100-00 5-20-2-130001-45300000-00-000100-00 5-20-2-130001-45300000-00-000100-00 5-20-2-130001-45300000-00-000100-00 5-20-2-130001-45300000-00-000100-00 5-20-2-130001-45300000-00-000100-00 5-20-2-130001-45300000-00-000100-00 6-20-2-130001-45300000-00-000100-00 6-20-2-130001-45300000-00-000100-00	INSUFFICIENT FUNDS INSUFFICIENT FUNDS INSUFFICIENT FUNDS INSUFFICIENT FUNDS ACCOUNT CLOSED INSUFFICIENT FUNDS INSUFFICIENT FUNDS ACCOUNT CLOSED INSUFFICIENT FUNDS INSUFFICIENT FUNDS INSUFFICIENT FUNDS INSUFFICIENT FUNDS	8.75 35.00 50.00 60.00 78.75 87.50 87.50 750.00 758.75 758.75

Grand Total:

\$3,433.75

02106-

The above named fund(s) has been reduced by the amount of this check(s) under the authority of Section 215.34, F.S.

Process Date: 12/21/1999

State Treasurer

30064 OCEAN BANK
780 N.W. 42ND AVENUE, MIAMI, FLORIDA 33126
63-1139-660 040268953 2120 2133 07 12-13-99 75/100 602 130274647 MEDI-WHEELS SYSTEMS 09-83 7019 S.W. 13TH STREET MAMI, FL 33144 MEMO DO W. 4. # 639648 PAY TO THE OF 945 HE

8152 148156

1000068796 ****758,75 -12/09/39-01041--011 1009068796 ****758,75

ENDORSE HERE



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 10, 2000

Medi Wheels Systems I,Inc. 7019 SW 13th St. #200 Miami, FL 33144

SUBJECT: MEDI-WHEELS SYSTEMS I, INC.

Ref. Number: 639648

Debit Memo #: 02106-J

This is to inform you that your check #30064 dated November 29, 1999 in the amount of \$758.75 and submitted for MEDI-WHEELS SYSTEMS I, INC. has been returned to us by your bank because of Insufficient Funds.

We request that you remit a cashier's check or money order in amount of \$796.69 payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations Attn: Melinda Lilliston P.O. Box 6327 Tallahassee, FL 32314

If you have any questions concerning the returned check, please call (850) 487-6900.

Sincerely, Melinda Lilliston Administrative Assistant II Division of Corporations

Letter number: 900A00001249



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 14, 2000

Reparations 2273 Lee Rd. Suite 202 Winter Park, FL 32789

SUBJECT: REPARATIONS INCORPORATED

Ref. Number: P95000057700

Debit Memo #: 02106-I

Due to your failure to respond to our previous letter advising you of the returned check #1266, the Reinstatement for REPARATIONS INCORPORATED has been cancelled and is considered not filed as of February 14, 2000.

The status of your corporation has now reverted to its previous status of administratively dissolved or revoked.

If you have any questions concerning the returned check, please call (850) 487-6900.

Sincerely Melinda Lilliston Administrative Assistant II Division of Corporations

Letter number: 200A00007641

cc:Reparations Inc. 7217 Hawks Nest Blvd. Orlando, Fl. 32635