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REGISTERED AGENT MUST SIGN 1. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No (See other side for information on intangible tax) 2. I do hereby certify that the information supplied with this filling is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I release the Drivision of Corporations from any liability of non-compilance 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 filling ties owned by the corporation have been paid. The information indicated on this application is not accurate, and my signature shall have the same legal effect as if made under eath.			- ,			***	FL PL	
REGISTERED AGENT MUST SIGN 11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No Section 19.07(3)(k), Florida Statutes. I release the Drivision 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 contributed in an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 60, or 617, F.S. I further certify that when two this reinstatement application the reason for dissolution has been diminated, the corporate name state is the requirements of section 607,0401 or 617,0401; F.S., and that all tees owed by the corporation have been paid. The information indicated on this application is an accurate, and my signature shall have the same legal effect as it made under eath.	•	opointed the registered agent of the abo	naprad corpo	oration, am famillar w	ith and accept the o	bligations of Sect	on 607.0505, F.S.	
Dept. of Revenue under S. 199.032, Florida Statutes. Yes \(\begin{align*} \limits \) No \(\begin{align*} \limits \) on intangible tax.) 2. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I release the Drivision 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 filling this reinstalement 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 as a securate, and my signature shall have the same legal effect as it made under eath.		ent W Markey 9	EGISTERED AG	ENT MUST SIGN			Date 1///6/76	
Dept. of Revenue under S. 199.032, Florida Statutes. Yes \(\begin{align*} \limits \) No \(\begin{align*} \limits \) on intangible tax.) 2. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, I release the Drivision 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 filling this reinstalement 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 as a securate, and my signature shall have the same legal effect as it made under eath.	- 1	se this corneration now	any intone	rible tov to the				
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	lease the certify that	by certify that the information supplied to Division of Corporations from any liability It I am an officer or director or the rece	with this tiling is ily of non-compl iver or trustee e	voluntarily furnished lance with Section 11 mpowered to execute	and does not qualify 9.07(3)(k) in the even this application as	y for the exemption ont that the information provided for in c	in stated in Section 119.07(3)(k), Florida Stration supplied is deemed exempt from publications of 67, F.S. I further certify that	ic scoess. I when fling
	this reinst fees owed under oati	iatement application the reason for dis- d by the corporation have been paid. T h.	solution has bed The information i	on eliminated, the con indicated on this app	porale name satisfication is and	es the requirement accurate, and my	nts or section 607.0401 or 617.0401 F.S., signature shall have the same legal effect	and that all as if made
SIGNATURE:		_	1.	U//			10/96 20051-13	1-3900
SIGNATURE AND TYPED ON PRINTED NAME OF BIOMING OFFICER OR DIRECTOR	JIGHAIU		INTED NAME OF	BIGHING OFFICER OR	DIRECTOR	in San Bakina	Date Devime Phone 0	HAROM A