PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE Katherine Harris SECRETARY OF STATE VISION OF CORPORATIONS Secretary of State DIVISION OF CORPORATIONS F79363 99 OCT 21 PM 3: 24 DOCUMENT # 1. Corporation Name THE EXECUTIVE INVESTMENT GROUP, INC. Principal Place of Business Mailing Address 231 N.W. WEST PARK DR. 9179-5 FOUNTAINBLEAU BLVD **SUITE 102** SHITE 102 MIAMI FL 33172 MIAMI FL 33172 HS 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 04/21/1982 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For 65-0080794 City & State City & State Not Applicable \$8.75 Additional Fee required for a Certificate of Status CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director Title(s) City / State / Zip PD SANTA-MARIA, RAFAEL 231 NW W PK DR STE 102 MIAMI FL CARTAYA, DIANA ST 9179-5 FOUNTAIN BLEAU BLVD MIAMI FL ****158.75 ****158.7S 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent CARTAYA, DIANA Street Address (P.O. Box Number is Not Acceptable) 9179-5 FOUNTAINBLEAU BLVD **SUITE 102** Suite, Apt. #, Etc. **MIAMI FL 33172** City Zip Code State 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 Registered Agent REGISTERED AGENT MUST SIGN 11. 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 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 the section of the paid of the p on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. DAMELLAND . RAFALL SANTA-HANGE P/A 10/15/99 (305) 446-868 (
URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIVIDED DESIGNING Phone #

SIGNATURE:

THE EXECUTIVE INVESTMENT GROUP **Consulting Firm** 3025 Segovia Street, Coral Gables, Fl. 33134 (305) 446-8681

10-15-99

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Florida Dept. of State Division of Coaponations P.O. Box 6327 TAILA HASSEE, FL 32314 AHN: ShawN

Dean Shawn:

As per our phoNE CONVERSATION, This letter ists CONFIRM That we Never Received the RENEWAL Notice FOR This Year.

All that we receive was the Mutice of Dissolution, OR REVOLATION.

ENclosed please Find our Renewal Fee with The application for Reinstatement, since this was All that we received, as pen your instructions. Our conponention has been in good standing and

has filed on time All but once since 1982.

We would persity apparente your ASSISTANCE I'M CONNecting this motter. A Check For \$158.75 is enclosed, For the never Fee and centificate of status.