	PLEASE READ A	ALL INSTRU	JCTIONS	BEFORE C	OMPLETI	ING THIS F	ORM.	
APPLICAT FOR REINSTATE		Sar Se	ndra B. Mort ecretary of S	tate		ALED		
			VISION OF CORPORATIONS		98 DEC 21, PM 3: 57			
DOCUMENT # F960000 5544 1. Corporation Name PIRP, IMC.					SECTEMENT UP STATE TALLAMASSEE, FLORIDA			
Principal Place of Business Mailing Address							_ :	
HEW YOR	teorp luterna c Auchut, 37 UC, NY 11017	-ω -						
If above addresses are incorrect in any way, line through incorrect 2. New Principal Office Address, if Applicable 3. New Ma			nation and enter of Office Address, If A		4. Date Incorporated or Qualified To Do Business in Florida A/15-// To Do Business in Florida			
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5 55 1 7 2 5			
City & State	City & State			13-2	85 783	5	Not Applicable	
Zip ·	Country	Zip	Country	,	6. CERTIFICATI	E OF STATUS DESIRE		ditional Fee required Certificate of Status
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must								
Title(s) and/or Directors Off				eet Address of Each icer and/or Director ie Post Office Box N		4	City / State / 2	Zip
PRES. EDWARD G. LORD REW YORK,					12-			1
IPISEC F. JOI	80 PARK YEW YOR	AVG-37.	W -U17-					
TRGAS. JOHN R. FRASER			NEW YORK, NY 10-017					
OFFICER CHAR	80 PARK	AVE-37 11 K, NY 100						
RE	INSTATEN	IENT	96-98	GL	<u> </u>	00002 98		
	ne and Address of Current F		,: 	Name	9. Name and A	Address of New Re	gistered Agent	
The Prentice 1201 Hays St	Street Address (P	O. Box Number	is Not Acceptable)		· :			
Tallahassee, Florida 32301				Suite, Apt. #, Etc.				
			_ [2]	City	<u>,</u>	<u></u>	State Zip	Code
	ne registered agent of the abor	ve named corporation	on, am familiar wit	h and accept the ob	ligations of Secti	on 607.0505, F.S.	<u> [</u>	
Signature of Registered Agent	eclK Dole	GISTERED AGENT	MUST SIGN		3 f f = 15	Date 12/18	/98	
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)								
this reinstatement ap owed by the corpora	officer or director or the receive plication, the reason for disso tion have been paid and the nature and accurate, and my significant of the property of the	ution has been elim ames of individuals	ninated, the corpor listed on this form	rate name satisfies and do not qualify for a	the requirements an exemption und	of section 607.0401	l or 617.0401, F	.S., that all fees
SIGNATURE:		TED NAME OF SIGN	ING OFFICER OR D	RECTOR	11/3	0/98 Date	2/2 - 59 1 Daytime	
	EGL, PRESIDER	7						

EGL,



ACCOUNT NO.: 072100000032 REFERENCE : COST LIMIT : ORDER DATE: December 15, 1998 ORDER TIME : 3:32 PM ORDER NO. : 065246-005 CUSTOMER NO: 4374025 CUSTOMER: Ms. Tess Cledera INVESTOORP INTERNATIONAL, INC. INVESTCORP INTERNATIONAL, INC. 280 Park Avenue 37th Floor, West Building New York, NY 10017 REINSTATEMENT NAME: PIRP, INC. EFFECTIVE DATE: XX REINSTATEMENT PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY __PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Christopher Smith EXAMINER'S INITIALS: