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REINSTATEMENT 98-99 7.5 1-1 29 49	
8. Name and Address of Current Registered Agent 9 Name and Address of New Registered Agent Name	
ED BUSH & ASSOCIATES, PA OPA LOCKA AIRPORT BLDG #102 OPA LOCKA FL 33504-2327 Street Address (P.O. Box Number is Not Acceptable) UT 9 SEABROOK ROAD Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) UT 9 SEABROOK ROAD Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) UT 9 SEABROOK ROAD Street Address (P.O. Box Number is Not Acceptable)	000
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.	<u> </u>
Signature of Registered Agent Author Registered Agent ED Burn, INSMENT Date 4-20-99	
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.)	
12. 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 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., that all if 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 into on this application is true and accurate, and my signature shall have the same legal effect as if made under oath SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR PRINTED PART OF SIGNIFE TOR.	ees