FOR	A DEPARTMENT ÕF STATE Sandra B. Mortham Secretary of State		NGAIHISGEORM. AND FILED DEC 28 AH 9: 10	
	VISION OF CORPORATIONS	_}		
DOCUMENT # F970000576 1. Corporation Name	67	TAL	CRETARY OF STATE LAHASSEE. FLORIDA	
HGG ACQUISITION MACK REALTY CO	MPANY			
Principal Place of Business Mailing Address				
E E. MARKET ST. 2955 E. MARKET ST. K PA 17402 YORK PA 17402		FIEINSTATEVIEW SK		
		FINST	ALFINITION TO	
12 West Market St 12	ng Office Address, If Applicable W , Market St	 Date incorpo 	orated or Qualified ess in Florida 10/31/1997	
Suite, Apt. #, etc. Suite, Apt. #. City & State City & State	-15036	5. FEI Number	23 -2959299 Applied For	
Zip Country Zip	Country	6.	Not Applicable \$8.75 Additional Fee required	
17465 USA 1746	s USA	<u> </u>	OF STATUS DESIRED for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Flor Name of Officers	Street Address of Each	h i		
Title(s) and/or Directors	Officer and/or Director 3 (Do NOT Use Post Office Box N	r i	City / State / Zip	
CCEO RIKLIS, MESHULAM	9560 WILSHIRE BLVD.	BEVERLY HILLS CA 90212		
P WATKINS, TED	2055 E. MARKET ST. 1≥ W, A	Market St	YORK PA 17402 /7405	
VT WEINER, PAUL	2955 E. MARKET ST. 12 W - 1	norketst	YORK PA 17402 (7405	
S MICHAELSON, ARTHUR M	633 THIRD AVE.		NEW YORK NY 10017	
		5)	000027346525 -01/08/9901064022	
		Mish	30	
8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent			ddress of New Registered Agent	
UNITED CORPORATE SERVICES, INC.	Name	Street Address (P.O. Box Number is Not Acceptable)		
801 NE 167TH ST., STE. 300				
NORTH MIAMI BEACH FL 33162		Suite, Apt. #, Etc.		
	City		State Zip Code	
10. 1, being appointed the registered agent of the above named corporation of Signature of	pration amifamiliar with and accept the co	obligations of Section	on 607.0505, F.S. Date 12/22/48	
Registered Agent HICHAEL BANK - PROGREGISTERED AG	ENT MUST SIGN			
 This corporation owes or has paid the Intangible Personal Property tax due 		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 filing 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 on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/3/98

717-699-4135

Daytime Phone #