, PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State DIVISION OF CORPORATIONS

CORPORATION REINSTATEMENT

}						·	- nino	T 31	PM 1:31			
DOCUMENT # F9900003568												
1. Corporation Name								SECRETARY OF STATE TALLAHASSEE. FLORIDA				
			CInter	nation	alI	₁td.						
a Ne	ew Yor	k Corporation	1									
2. Principa	Office Addres			-								
·				N. Fe	dera	ıl Hwy	DEIAIG	97F A	TPARFATT	1	7)-1)	
Suite, Apt. #		etc.	***************************************		HEIN?	H	EMEN	ĮU				
Suite 206 Suit				e 206			4. Date Incorporated or Qualified To Do Business in Florida 7 / 1 3 / 1 0 0 0					
,			City & State				7/12/1999 5. FEI Number Applied For					
				Boca Raton, FL				132831449 Not Applicable				
Zip Country 33432 U.S.A.		Zip Country 33432 U.S.A.			6. CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status							
3343	T -	0.5.A.	<u> </u>						for a C	ertificate	of Status	
	Name	7. Name and Address of Current Registered										
•	Charles S. Messner Street Address (P.O. Box Number is Not Acceptable)							2000046699920				
								-11/07/0101004003				
	1515 N. Federal Hwy.,								****900.00 *	****	ມນ.ນນ	
	Suite 206								21:			
	City BO	ca Raton						State	Zip Code 3 3,4 3 2			
8. I, being	appointed the	e registered agent of the abo	ve named corpo	oration, am f	amillar wi	th and accept the	obligations of secti	on 607.05	05 or 617.0503, F.S.		(00/6)	
Signature o	(J. 1. 8 V	L .			,			10/30/01		CRZE081 (9/00)	
Registered	Agent BY:	monder s. [EGISTERED AG	ENT MUST	SIGN			Date	10/30/01		GR	
6 11							1- n-1 2 dit					
9. Names and Street Addresses of Each Officer and/or Director			d/or Director (Fig	Street Address of Each				-11/07/0			7114	
Titles	tles Name of Officers and/or Directors			Officer and/or Director				City / State /			7.50	
								l <u>.</u>				
CEO	Robert B. Campbell			1515 N. Federal F			Hwy	Hwy Boca Raton, FL 33432				
P	Donald R. Wilborn			1515 N. Federal B			Hwy	Hwy Boca Raton, F			, 33432	
7,7	D			1515	* **	n - 2 1		D	- D-4 DI	224	22	
V	Dona.	ld Lee		1515	N.	Federal	нму	вос	a Raton, FL	334	32	
V	Trace	ey McLeod		1515	N.	Federal	Hwy	Вос	a Raton, FL	334	32	
10. I certify	that I am an	officer or director or the rece	iver or trustee er	mpowered to	execute	this application a	s provided for in cha	pter 607 d	or 617, F.S. I further certify	that whe	n filing	
		oplication, the reason for diss tion have been paid and the										
		true and accurate and my s									1	
			Boll	<u> </u>	0/	_ /	10/30/	/21	(561)417-	7 U -	, 4	
SIGNA	TURE: ع	GNATURE AND TYPED OR PA	INTED NAME OF	SIGNING OFF	ICER OR	DIRECTOR	10/30/	Date	(361) 41 / 2 Daytime P	/7 (hone #	<u>' / </u>	
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