

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<p><b>APPLICATION FOR REINSTATEMENT</b></p>		<p>FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS</p>
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FILED

98 NOV 17 PM 2:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # H38373**

1. Corporation Name  
*Lawphone Legal Services, Inc.*

*W980000 25962*

Principal Place of Business <b>1200 South Pine Island Rd. Plantation, FL 33324</b>	Mailing Address <b>4501 Forbes Blvd. Lanham, MD 20706</b>
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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 Address, If Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

DO NOT WRITE IN THIS SPACE

4. Date Incorporated or Qualified To Do Business in Florida <b>1/17/1985</b>	
5. FEI Number <b>94-2954793</b>	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
F	Stanley Plotnick	3422 Bay Front Drive	Baldwin, NY
S	Stephen Klein	4501 Forbes Blvd.	Lanham, MD 20706
			300002692793--6 11/20/98--01060--018 1358.75 ***1358.75 <b>REINSTATEMENT</b> 793-98 B. 11/18/98

8. Name and Address of Current Registered Agent

**CT Corporation System  
1200 S. Pine Island Rd.  
Plantation, FL 33324**

9. Name and Address of New Registered Agent

Name		
Street Address (P.O. Box Number is Not Acceptable)		
Suite, Apt. #, Etc.		
City	State	Zip Code
	<b>FL</b>	

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: *[Signature]* **Adhamilton, Asst. Secy** Date: **10/23/98**

REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes  No  (See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: *Adhamilton, Stephen Klein Secy* **11/3/98 301-459-8020**

CR2E040 (12/95)