•		PLEAS	SE READ A	ALL INST	RUCTIONS	BEFORE C	COMPLET	ING THIS FORM,	10 0 1010	
* API	EAR			FLORIDA \$	A DEPARTME Sandra B. Mo Secretary of S	NT OF STATE rtham State		PILE!	129.1012	
DOCUMENT # J06061					ISION OF CORPORATIONS		97 OCT 27 PM 12: 48			
1. Corporation Name FLORAL PROMOTIONS, INC.							SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal Place of Business 405 S STATE RD 7 PLANTATION FL 33317 PLANTATION FL 33317										
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 Office Address, If Applicable							4.5	0.000		
Sulte, Apt. #, etc.				Suite, Apt. #, etc.			4. Date Incorporated or Qualified To Do Business in Florida 03/24/1986			
City & State				City & State			5. FEI Number 65-0094657 Applied For Not Applied be			
Zip Country			Zip Country		у	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status				
7. Names	and Street Ad			r Director (Flo	rida nonprofit corpor					
Title(s) 1	`` 2				OI 3 (Do NOT U	eet Address of Each ficer and/or Director se Post Office Box N	Numbers) City / State / Zip			
PD	KERBEL, GAIL N				4210 SW 9TH S	T		PLANTATION FL		
VSC	KERBEL, PAUL				4210 SW 9TH ST			PLANTATION FL		
							1000023333510 -10/29/9701124022 ****165.00 ****165.00			
	8. Narr	ne and Addro	ess of Current R	egistered Age	nt		9. Name and A	Address of New Registered A	2 gent	
KERBEL, PAUL							0.0	Į.	(897)	
7105 SOUTH STATE ROAD 7 PLANTATION FL 33314						Street Address (P.O. Box Number is Not Acceptable) Sulte, Apt. #, Etc.				
						City State Zip Code				
10. I, being appointed the registered agent of the aboye named corporation, and familiar with and accept the ob							FL			
Signature o Registered	1 /				ENT MUST SION			Date /0/23	47	
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No No No (See other side for Information on intangible tex.)										
12.1 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 filling 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Date Date Daylime Phone #										

pg.2012

FLORAL PROMOTIONS, INC.

405 SOUTH STATE ROAD 7, PLANTATION, FL 33317

October 23, 1997

DEPARTMENT OF STATE DIVISION OF CORPORATIOONS P.O. BOX 6327 TALLAHASSEE, FL 32314

DEAR SIR OR MADAME.

WE RECEIVED A REVOCATION OF OUR CORPORATION VIA THE MAIL TODAY. I WAS TOTALLY UNAWARE THAT THIS WAS NOT PAID. WHEN I CALLED TO ASK ABOUT THIS, I WAS INFORMED THAT I WAS SENT A REMINDER TWICE. I DID NOT RECEIVE EITHER ONE OF THEM.

SINCE I DID NOT HAVE A BILL, I DID NOT EVEN THINK TO ASK MY ACCOUNTANT ABOUT THIS. IF YOU LOOK AT OUR PAYMENT HISTORY OVER THE LAST SEVERAL YEARS, YOU WILL NOTICE THAT WE SENT PAYMENT IN A TIMELY FASHION, WHICH WE WOULD HAVE DONE THIS TIME.

WE WOULD LIKE TO HAVE THE PENALTIES WAIVED. THANK YOU FOR YOUR HELP.

YOURS TRULY,

Paul Kerbel

VICE-PRESIDENT

P.S. PLEASE FIND ENCLOSED A CHECK FOR \$165.00 FOR THE FILING FEE.