

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM, APPROVED AND FILED

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

97 NOV 14 AM 10:39
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # J18871

1. Corporation Name
WAREHOUSING OF BREVARD, INC.

Principal Place of Business
 101 S. COURTENAY PKWY
 PO-BOX 541888 --
 MERRITT ISLAND FL 32954-1366

Mailing Address
 101 SO. COURTENAY PKWY
 MERRITT ISLAND FL 32952



REINSTATEMENT 99

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
101 So. Courtenay Pkwy.

Suite, Apt. #, etc.
Suite 201

City & State
Merritt Island, Fla

Zip Country
32952-4855 Brevard

3. New Mailing Office Address, If Applicable
101 So. Courtenay Pkwy

Suite, Apt. #, etc.
Suite 201

City & State
Merritt Island, Fla.

Zip Country
32952-4855 Brevard

4. Date Incorporated or Qualified To Do Business in Florida
06/11/1986

5. FEI Number
59-2697252

Applied For
 Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$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 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
POST	SPIELVOGEL, LEONARD	101 S COURTENAY PKWY	MERRITT ISLAND FL 32952
DAS	SPIELVOGEL, JEAN C.	101 S COURTENAY PKWY	MERRITT ISLAND FL 32952
VP	BARTLING, SANDRA J.	101 S. COURTENAY PARKWAY	MERRITT ISLAND FL 32952

7000002350597--0
 -11/18/97--01058--022
 ****750.00 ****750.00

Handwritten signature/initials

8. Name and Address of Current Registered Agent

SPIELVOGEL, LEONARD
101 SOUTH COURTENAY PARKWAY
MERRITT ISLAND FL 32952

9. Name and Address of New Registered Agent

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

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

Handwritten signature of Leonard Spielvogel

REGISTERED AGENT MUST SIGN

Date **November 11, 1997**

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 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)(f), 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: *Handwritten signature*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Oct. 29, 1997 407/453-2333
 Date Daytime Phone #

CR2E940 (8/97)