## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
2000 - 2001
IJRR



## FLORIDA DEPARTMENT OF STATE **Katherine Harris** Secretary of State

**DIVISION OF CORPORATIONS** 

DOCUMENT # 1. Corporation Name

International Refinishing Corporation

FILED

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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2. Principal Office Address 3. Mailing C				ffice Address					•				
4725 Orange Drive 4725				range Drive				~~					
Suite, Apt. #, etc. Suite, Ap				#, etc.									
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City & State		City & State	City & State								· · · · ·		
Ft. I	Lauder	dale, Fl	Ft. Lau	Ft. Lauderdale, Fl					5- <i>0</i> 0	01935	4	<del></del>	ed For pplicable
Zip		Country	Zip		Country	1		6.				Iditional Fo	ee required
33314 Broward		33314		Brow	vard		CERTIFICATE OF STATUS DESIRED for a Certi						
			7. 'N	ame and	Address o	f Current Re	gistere	ed Agent					
	Name 800004064028-												
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	Street Add	Iress (P.O. Box Number	r is Not Acceptable)							****300.0			
	116 Kesington-Road Suite, Apt. #, Etc.												
			Fl 33021					<del> </del>			:		<del>د</del>
City									State	Zip Code			
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8. I, being	appointed the	registered agent of the	above named corps	nation, am	familiar wit	th and accep	t the ob	ligations of section	on 607.050	)5 or 617.0503,	F.S.		ŀ
Signature of								0-4-	March	13,	2001	5 :	
Registered	Agent	ENT MUS	NT MUST SIGN				Date.	Torch					
Q Namas	and Street A	ddresses of Each Office	er and/or Director (Flo	rida nonnr	rafit carpara	ations must li	ist at lea	est 3 directors)					
	and Street A	Name of	ST BILLION DIRECTOR (1 70	Titou Horipi		eet Address					State ( 7	<del></del>	
Titles	Officers and/or Directors			Officer and/or Director					City / State / Zip				
Pres.	Mark	R. Buchalt	alter 116 Kesington				Roa	ad Hollywood, Fl 33021				21	
V.P.e	Sanford Chansky			13286 NW 5th Street				et	Plan	ntation	, Fl	333	325
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10. 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, F.S. If 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, 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

March 13, 01 (954)792.1805

Daytime Phone #



200

March 13, 2001

Kathy Ashton., Document Specialist

FLORIDA DEPARTMENT OF STATE

Division of Corporations

PO Box 6327

Tallahassee, Florida 32314

RE: DOCUMENT # K09896

Dear Ms. Ashton:

Thank you very much for your prompt response to our letter dated February 23, 2001.

This letter is to certify that on about April 10, 2000 all pertaining documentation along with payment was sent for the proper Annual Report and the only reasonable explanation we can give is that it was lost/ misplaced in the mail and/or the possibility that we moved since the previous renewal and/if the letter was returned never was forwarded to the new location.

Hereby I am also requesting a waiver for our corporation and (per your request) enclosed you will find the Corporation Reinstatement form filed, check #18316 for the amount of \$300.00 and copy of the letter number 101A00013262 per your request in order for you to review and please consider the reinstatement of our Corporation.

As stated on our previous letter we are a small company and the restoration fee would be a hardship for us.

Thank you very much for all the assistance you can give us in this important matter.

Sincerely,

Mark R. Buchalter., President

**Enclosures**