

**APPLICATION FOR REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE  
 Jim Smith  
 Secretary of State  
 DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

**APPROVED AND FILED**

97 FEB 28 AM 11:54

Read Instructions on Other Side Before Mailing Entry  
 Make Check Payable To: *Department of State*

1. Name and Mailing Address of Corporation: **DOCUMENT # K57346**

**Intersal, Inc.  
 c/o Louis J. Pleeter  
 2255 Glades Road, #236-W  
 Boca Raton, FL 33431**

2. If Address of Corporation has changed in any way, enter the correct address below. The name of the corporation can be changed only by filing an amendment.

Address

Address

City and State

Zip Code

3. Date Incorporated or Qualified To Do Business in Florida

**01/06/1989**

4. FEI Number

**65-0103990**

FEI Number Applied For

FEI Number Not Applicable

5.

**\$8.75** Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED

6. Names and Street Addresses of Each Officer and/or Director

1 Title	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 and State
D	MASTERS, PHILIP	221-18 MERRICK BLVD.	JAMAICA, NY 11413
D	FIELDS, ALLAN N.	4141 N. 41ST STREET	HOLLYWOOD, FL 33021
D	PLEETER, LOUIS J.	2255 GLADES ROAD, #236-W	BOCA RATON, FL 33431
D	HAFT, GLENN R.	1200 S. PINE ISLAND RD. #475	PLANTATION, FL 33324

**REINSTATEMENT 95-97**

**REGISTERED AGENT INFORMATION**

7. Name and Address of Current Registered Agent

**LOUIS J. PLEETER  
 2255 GLADES ROAD, #236-W  
 BOCA RATON, FL 33431**

8. Name and Address of New Registered Agent and/or Office

Name

*L. Pleeter*

Street Address (Do NOT Use P.O. Box Number)

*2/28/97*

Street Address (Do NOT Use P.O. Box Number) **2255 GLADES ROAD #236-W**

**-03/04/97--01037--015**

City and State

**\*\*\*1080.00 \*\*\*1080.00**

Zip

**FL.**

9. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0606, F.S.

Signature of Registered Agent

*Louis J. Pleeter*  
 REGISTERED AGENT MUST SIGN

Date **02/27/97**

10. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box  (See other side for additional information.)

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 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 of Officer or Director

*Louis J. Pleeter*  
**Louis J. Pleeter**

Date **02/27/97**

Daytime Phone # **(561) 995-9350**

Typed or printed name of signing officer or director