PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS HORWED AND FLORIDA DEPARTMENT OF STATE CORPORATION **Katherine Harris** REINSTATEMENT Secretary of State

DIVISION OF CORPORATIONS

FILED										
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00 OCT 30 AM 11: 40

SECRETARY OF STATE

DOCUMENT # K 93557					TALLAHASSEE, FLORIDA				
1. Corporation	nagement Co	nsultant	Group, I	n4 00	000034558 11/07/0001 *****758.75 *	502 103011 ***758.75			
2. Principal O	ffice Address	3. Mailing Office Addre	ess			, ,			
3024		3024 Da	y Avenue	-REINS	STATEMENT	99-00			
Suite, Apt. #, et	ic.	Suite, Apt. #, etc.			porated or Qualified	120			
City & State	, <u></u> ,	City & State	<del>,</del>		iness in Florida 6/1	789			
Mic	imi, FL	Miami,	FL	5. FEI Numb	145412	Applied For Not Applicable			
33132	3 USA	<sup>Zip</sup> 33133	Country	6	S8.75	Additional Fee required a Certificate of Status			
			Address of Current Re	-					
	Name - Theod	ove J.	hehm	ANN					
5	Street Address (P.O. Box Number is N	ot Acceptable)	2560	Hickory	1 Ridio Pa	1			
	Suite, Apt. #, Etc.			<u></u>	1 6 13				
	City				State Zip Code				
	174	LLAhasz	3 E E		FL 32308				
8. I, being app Signature of Registered Age		ve named corporation, am	Jehm	the obligations of sect	Date 10/30	00			
9. Names and	d Street Addresses of Each Officer an	d/or Director (Florida nonpre	ofit corporations must lis	st at least 3 directors)	T				
Titles	Name of Officers and/or Directors		Street Address o Officer and/or D		City / State	/ Zip			
DC	carter J. Posi	er 300	24 Day	Avenue	Miami, FL	33131			
			,						
				•					
					4/22/99 9000	5/046			
		<u>.</u>			4	150 00			
						LS			
this reinsta owed by th	at I am an officer or director or the rece atternent application, the reason for diss ne corporation have been paid and the plication is true and accurate, and my s	olution has been eliminated names of individuals listed	d, the corporate name sa on this form do not quali	atisfies the requirement ify for an exemption un	s of section 607.0401 or 617.040	1, F.S., that all fees			