PLEASE READ ALL INSTRUCTIONS BEFOR	E COMPLETING THIS FORM.
/mi	

APPLICATION
FOR
REINSTATEMEN



## FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT#** 

L16800

1. Corporation Name

MARBLEDGE, INC.

Mailing Address

C/O JON JASIEL LAKE WORTH FL 33461

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FRIEDMAN, JONATHAN

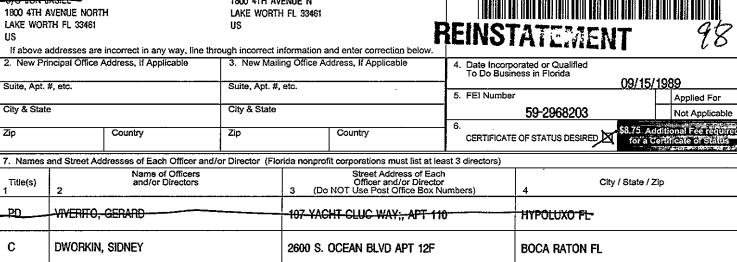
Principal Place of Business

1800 4TH AVENUE N

FILED

98 NOV 23 AM 9:58

SECRETARY OF STATE TALLAHASSEE, FLORIDA



1824 LYNTHON CIRCLE

0	E.J. VENTER.	14544 AU	14544 AUTUM AVE		33414	
				900002 -12/08/ ****/5	706259-	
				****** /5	8.75 ****758	
8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent				gent		
FRIEDMAN, JONATHAN -1800 4TH AVENUE -LAKE WORTH FL 33461-		Name  E. J. VENT  Street Address (P.O. Box Numbe /800 + P. AVENUE  Suite, Apt. #, Etc.	er is Not Acceptable)	CRZEDO (9988)		
			Lake WORTH	State <b>FL</b>	Zip Code 3346/	
0. !, bei	ing appointed the registered agent of the above			ction 607.0505, F.S.		
Signature Registere	e of ed Agent X	ER. B.FOL	URED	Date 11/18/98		
	REGISTERED AGENT MUST SIGN					

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)(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.

Yes l

11. This corporation owes or has paid the current year

Intangible Personal Property tax due June 30.

WELLINGTON FL

(See other side for information on intangible tax.)