PLEASE READ	ALL INSTRUCTION	IS BEFORE C	COMPLETING THIS FO	RM.	
* APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			98 SEC	
DOCUMENT # L22047 1. Corporation Name				FILED Jul 15 PM Jul 15 PM	
HOUSEHOLD HELPERS, INC.				F. F.	
Principal Place of Business Mailing Address 7695 SW 104 Street			:	ORIDA ORIDA	
Suite 210 Miami, FL 33156	TEVENT 190	1a-98			
If above addresses are incorrect in any way, line through incorrect information and enter correction below. New Principal Office Address, If Applicable 3. New Malling Address, If Applicable			DO NOT WRITE IN 4. Date Incorporated or Qualified To Do Business in Florida		
7695 SW 104 Street	Suite, Apt. #, etc.			10-10-89	
Suite 210 City & State City & State			5. FEI Number	X Applied For	
Miami, FL	<u> </u>		6.	Not Applicable S8 75 Additional Fee required	
^{Zip} 33156 Country	Zip Cou	intry	CERTIFICATE OF STATUS DESIRED	Torin Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title(s) Name of Officers and/or Directors	ŀ	Street Address of Each Officer and/or Director Use Post Office Box N	C	City / State / Zip	
		.04 St., #210		3156	
					
		:	6000025 96/16/ ***177	561696—-6 98-01112-002 2,50 ***1772.50	
		 -	O Name and Address of New Parties	Acred Agent	
8. Name and Address of Current Registered Agent Marc A. Kuperman		Name	9. Name and Address of New Registered Agent Name		
7695 SW 104 Street, Suite Miami, FL 33156	Street Address (P	Street Address (P.O. Box Number is Not Acceptable)			
·	Suite, Apt. #, Etc.	Suite, Apt. W, Etc.			
		City		State Zip Code	
10. I, being appointed the edistered agent of the phove named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Fforida Statutes. Yes No (See other side for information on intangible tax.)					
12. I do hereby certify that the information supplied with this filing is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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 less owed by the corporation has 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. Marc A. Kuperman, Pres. 6/10/98 (305) 663-3333					
SIGNATURE: Marc A. Kuperman, Pres. 6/10/98 (305) 663-3333					

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32302 , (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Will Pick Up _

Walk-In _____

,	
Household Helper, Inc.	
•	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend, File
	RA Resignation
•	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy Certificate of Good Standing
	Certificate of Good Standing
All	Certificate of Status
(a) A	Certificate of Status Certificate of Fictitious Name
	Corp Record Search
	Corp Record Search 22 28
	Fictitious Search
0'	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by: ///////////////////////////////////	UCC 1 or 3 File
- Coll (11 123)	UCC 11 Search
Name Date Time	UCC 11 Retrieval



Secretary of State

June 11, 1998

Capital Connection, Inc. 417 E. Virginia Street Suite 1
Tallahassee, FL 32302

SUBJECT: HOUSEHOLD HELPERS, INC.

Ref. Number: L22047

We have received your document for HOUSEHOLD HELPERS, INC. and check(s) totaling \$1772.50. However, your check(s) and document are being returned for the following:

Pursuant to section 607.1422(1)(b), 617.1422(1)(b), or 608.4482, Florida Statutes, your designated registered agent must acknowledge the designation by signing in the appropriate block of the form.

If you have any questions concerning the filing of your document, please call (850) 487-6907.

Annette Hogan Corporate Specialist

Letter Number: 898A00032882