				STDLICT	IONS BEEODE C	NADLET				
PLEASE READ ALL INSTRUCTIONS BEFORE OF APPLICATION FOR REINSTATEMENT PLEASE READ ALL INSTRUCTIONS BEFORE OF CORPORATIONS PLEASE READ ALL INSTRUCTIONS BEFORE OF CORPORATIONS PLEASE READ ALL INSTRUCTIONS BEFORE OF CORPORATIONS							7			
DOCUMENT # L32762 1. Corporation Name						98 NOV 19 AM 7: 57				
BUDGET PARTY RENTAL INCORPORATED						SECRETARY OF STATE TALLAHASSEE. FLORIDA				
Principal Place of Business Mailing Address										
BAY #17 MIAMI FL 3 US			7721 SW Miami Fl US	13432 S.W. 131ST STREET 7721 SW 177 ST MIAMI FL 33186 US ough incorrect information and enter correction below.						
					dress, If Applicable	Date Incorporated or Qualified To Do Business in Florida				
Suite, Apt. #, etc.				t. #, etc.		11/27/1989				
City & State			City & St	ate			5. FEI Number Applied For Not Applicable			
Zip		Country	Zip		Country	6. CERTIFICATI	OF STATUS DESIRED	\$8.75 Addit	lonal Fee required	
7. Names	and Street Add	resses of Each O	fficer and/or Director	(Florida nonprof	I lit corporations must list at lea	ıst 3 directors)				
Title(s) Name of Officers and/or Directors				2 (D-	Street Address of Each Officer and/or Director NOT Use Post Office Box Nu	City / State / Zip				
PD •					15421 S.W. 163RD ST		MIAMI FL			
				-	· <u> </u>					
					· E		5000026985261 -12/01/98-01024-015 ****150.00 ****150.00			
				-						
	8, Name	and Address of	Current Registered	Agent		9. Name and A	Address of New Reg	stered Agent		
Name						(866)				
	indēz, Lidia S.W. 163Rīd				Street Address (P	Street Address (P.O. Box Number is Not Acceptable) Suite Ant # Ftc				
MIAMI FL 33187					Suite, Apt. #, Etc.					
					City			State Zip Co	nde	
10. I, being Signature o Registered		registered agent	NATUE	<u> </u>	amillar with and accept the ob QUIRED SIGN	oligations of Secti	оп 607.0505, F.S. Date			
11. Th	is corpoi angible f	ration owe Personal P	s or has paid roperty tax d	the curre ue June 3	ent year 30. Yes 🗹	No 🗆		other side for info on intangible tax		
this rein owed by	statement app the corporation	ication, the reaso in have been paid	n for dissolution has b I and the names of Inc	een eliminated, lividuals listed o	execute this application as p the corporate name satisfies in this form do not qualify for a legal effect as if made under	the requirements an exemption und	of section 607,0401 d	r 617.0401, F.S.	, that all fees	
SIGNAT	TURE:	NATURE AND TYP	INE ED OR PRINTED NAME	OF SIGNING OFF	UIRED ICER OR DIRECTOR	/1-	77-98 Date	305 -)S Daytime Pho	-3-7568 ine#	

BUDGET PARTY & TENT RENTAL

13432 SW 131 STREET, MIAMI, FLORIDA 33186 305-252-7368 FAX 305-232-7283

November 16, 1998

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS ANNUAL REPORTS/REINSTATEMENT SECTION P.O. BOX 6327 TALLAHASSEE, FL 32314-6327

RE: L32762

DEAR SIRS:

WE ARE IN RECEIPT OF THE REVOCATION OR DISSOLUTION OF OUR CERTIFICATE AND WE WERE SURPRISED SINCE AFTER OUR ADDRESS CHANGE WE NEVER RECEIVED ANY CORRESPONDENCE FROM YOUR OFFICE UNTIL TODAY.

IF YOU CHECK OUR RECORD WE HAVE NEVER BEEN REVOKED BEFORE AND THIS WAS AN OVERSIGHT SINCE WE DID NOT RECEIVE THE RENEWAL OR ANY NOTICE FROM YOUR OFFICE.

PLEASE REVIEW THIS AND NOTIFY ME IF WE CAN DEDUCT THE PENALTIES.

ATTACHED IS THE YEARLY FEE OF \$150,00 AS STATED BY YOUR OFFICE IN OUR CONVERSATION TODAY.

Thanking you in advance,

Lidia E. Hemandez

President