

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # L 50754

1. Corporation Name

ADVANCE MARKETING REAL ESTATE GROUP, Inc.

Principal Place of Business

Mailing Address

4306 W. CAYUGA ST.  
TAMPA, FL 33614

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

FILED  
97 OCT -9 PM 2:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

REINSTATEMENT AM

4. Date Incorporated or Qualified To Do Business in Florida

16 FEB 1990

5. FEI Number

59-2993318

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	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 / State / Zip
Pres	CHARLES R. Kenner	4306 W. CAYUGA	Tampa FL 33614
Sec	CHARLES R. Kenner	11	100002321181--5 -10/15/97--01087--015 ****758.791 ****758.75
Treas.	CHARLES R. Kenner	11	

UB  
10-10-97

8. Name and Address of Current Registered Agent

CHARLES R. Kenner  
11905 MIDDLEBURY DR  
TAMPA, FL 33626

9. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, Etc.  
City State Zip Code  
FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

*Charles R. Kenner*  
REGISTERED AGENT MUST SIGN

Date 10-8-97

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., 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)(j), 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.

SIGNATURE: *Charles R. Kenner* pres CHARLES R. Kenner 10-8-97  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
(813) 998-0100

CR2E040 (12/96)