PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM FLORIDA DEPARTMENT OF STATE **APPLICATION** Sandra B. Mortham Secretary of State **PREINSTATEMENT** DIVISION OF CORPORATIONS 1996 SEP 23 PM 2: 32 DOCUMENT # SECRETARY OF STATE 1. Corporation Name TALLAHASSEL FLORIDA ACQUISITION SYSTEMS, INC. Principal Place of Business Mailing Address 8211 WEST BROWARD BLVD 8211 WEST BROWARD BLVD STE 330 STE 330 PLANTATION FL 33324 PLANTATION FL 33324 If above addresses are incorrect in any way, line through incorrect information and enter correction below. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 02/26/1990 Suite, Ant. #. etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State 65-0181061 City & State \$8.75 Additional Fee required for a Certificate of Status Country Country CERTIFICATE OF STATUS DESIRED Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Title(s) and/or Directors City / State / Zip PS CAMUS, PABLO G. 8211 W. BROWARD BLVD., STE 330 PLANTATION FL ADAMSON, DAVID 8211 W. BROWARD BLVD, STE 330 PLANTATION FL 900991977910---6 10/16/96--01059--018 ****225.00 ****225.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name CAMUS, PABLO G. Street Address (P.O. Box Number is Not Acceptable) 8211 WEST BROWARD BOULEVARD **STE 330** Suite, Apt. #, Etc. **PLANTATION FL 33324** City State Zip Code 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 REGISTERED AGENT MUST SIGN Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. (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 filling 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/18/96

(954) 452-8222

ACQUISITION SYSTEMS, INC.

8211 West Broward Boulevard Suite # 330

Plantation, Florida 33324

September 17, 1996

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

Attention: Sean Toner

Re: Reinstatement of 65-0181061

Dear Mr. Toner:

Pursuant to our telephone conversation of earlier today, please accept this as my formal request for the immediate reinstatement of the above referenced company.

As I stated in my telephone conversation, I filed the corporate reports on all three companies that I am an officer of at the same time, and for some reason, this one never made it through the process. The name of the two companies that **did** go through are as follows:

Bankers Mortgage and Lending Group, Inc. Remodelers Depot, Inc.

I cannot explain how Acquisition Systems Inc. fell through the cracks, but it did to the extent that the fee check never reached our bank either.

Therefore at your instruction, I am enclosing a new check in the amount of \$ 225.00 along with this reinstatement form, in hopes this can be reversed without interruption.

Thanking you in advance for your anticipated cooperation, I remain,

Very truly yours,

Pablo Camus, President