

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 MAY 10 AM 9:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L 69948

1. Corporation Name

ANNDAV HOLDINGS, INC.

2. Principal Office Address

97 Sunset Drive

3. Mailing Office Address

3800 Tamiami Trail

Suite, Apt. #, etc.

Apt. 103 - David Genshaft

Suite, Apt. #, etc.

Box 143 - Paradise Plaza

City & State

Sarasota, FL

City & State

Sarasota, FL

Zip

34236

Country

USA

Zip

34239

Country

USA

REINSTATEMENT 93-50

4. Date Incorporated or Qualified To Do Business in Florida
April 30, 1990

5. FEI Number

65-0188194

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Ronald G. Figler, Esq.

Street Address (P.O. Box Number is Not Acceptable)

155 South Ocean Drive

Suite, Apt. #, Etc.

Unit 132

City

Boca Raton

300003284413-3

-06/12/00--01025--011

*****8.75 *****8.75

State
FL

Zip Code
33432

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date May 4, 2000

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/T	DAVID GENSHAFT	97 SUNSET DRIVE, APT. 103	SARASOTA, FL 34236
S	Ronald G. Figler	155 South Ocean Drive	Boca Raton, FL 33432
D	Nelson E. Genshaft	2381 Fair Avenue	Columbus, OH 43209
D	Debra G. Kalette	2705 Inverness Road	Shaker Heights, OH 44122
			300003284413-3 -06/12/00--01025--012 ***1800.00 ***1800.00

10. 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.

SIGNATURE:

David Genshaft

5-10-00

(330) 493-0040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/99)

KE