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		LEASE READ			ENT OF STATE		A 5.20年20日有有数数	UNIVI.			
, AP	PLICATION FOR		FLORIDA	Sandra B. Me			FILED				
REINISTATEMENT				Secretary of		96.0	EC 19 PM	la Co	er i sa, m ga i		
			DI	VISION OF CORP	ORATIONS	1 30 6	LC 13 FM	1. 23			
DOCUMENT # 1 75990						SECRETARY OF STATE TALLAHASSEE, FLORIDA					
1 Corpora						IALL	MIMOSEE, FL	OHIDA		.	
H. I	. CORNE	R & ASSOCIA	TES, II	NC.						Ì	
Principal Place of Business Mailing Address											
Sui+	o #1						_		γ_{l}		
Suite #4 521 Northlake Blvd.						- CIARC	STATE	HEN!		-	
			33408			KFIIA.	31111-		•		
				ng Address, II App	licable	4. Date incorp	orated or Qualified	IN THIS SPACE		\dashv	
Same as above 8.21 Suite, Apt. #. etc. Suite, Apt.				<u>Lakeview</u> etc.	Drive	May	ness in Florida 24, 1990				
West I City & State City & State				Palm Beac	ch, FL	5. FEI Number 65 019		F	Applied F		
Zip Country Zip				ip Country			OF STATUS DESIRE	\$8.75. Addi	lional Force	vo a iv Ka	
			33412		Lm Beach	<u> </u>		lor a Cer	IIIIcale of Si	atus	
7. Names and Street Addresses of Each Officer and/or Director (Name of Officers Name of Officers					Street Address of Each	h		Ob. / O / To		_	
Title(s)	2	and/or Directors	Officer and/or Director 3 (Do NOT Use Post Office Box								
Pres.	Harold	Harold L. Corner		8219 Lakeview Dri			ve West Palm Beach.			334	
V.P.	Caroly	n Corner		8219 Lal	ceview Dri	.ve	West Pa	lm Beach	, FL	334	
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							-12/24	<u> 7960104</u>		00	
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							ND 1	0 10 0) <u> </u>	\neg	
<u> </u>	O Name	and Address of Current F	Included And	<u></u>		O. Nome and	401	7-101-0	<u>u</u> _		
8. Name and Address of Current Registered Agent Name						9. Name and Address of New Registered Agent				CR2E040 (12/95)	
Harold L. Corner Suite #4					Street Address (Harold L. Corner Street Address (P.O. Box Number is Not Acceptable)					
521 Northlake Blvd.						8219 Lakeview Drive Suite, Apt. #, Etc.					
Nor	th Palm	Beach, FL	334 9 8		City			State Zip C	Code		
1 - 7					- 7	st Palm Beach Fi 33412					

12 I do hereby contrity that the information supplied with this filling is voluntarily furnished 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-comptiance 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 are provided for in chapter 607 or 617. Fig. 1 further certify that when filling this reinstatement application the reason for dissolution has been eliminated, the corporate many affailables the requirements of section 607.0401 or 617.0401, Fig., and that lees owed by the corporation have then paid. The information addition that application is trusted accurate, and my signature stall have the same legal effect as if made under eath

Yes ___

ua,

No X

SIGNATURE:

Pres.

V.P.

Signature of Registered Agent

SIGNATURA HO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Harold L. Corner AGENT MUST SIGN

Dept. of Revenue under S. 199.032, Florida Statutes.

11. Does this corporation pay any intangible tax to the

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

844 -63/2

(See other side for information on intangible tax.)

Date 12/16/96