	PLEASE READ	ALL INST	RUCTIONS	BEFORE C	OMPLET	ING THIS FORM.	pg 10/2	
* ADDLOAT	97.98		A DEPARTME Sandra B. Moi Secretary of S IVISION OF CORPO	r <b>tham</b> State		APRICALI AND PLOTA	, 10	
DOCUMEN	IT # L 7665	,4				98 JAN 13 PH	H <b>: በ</b> ብ	
1. Corporation Name USA ROALLY SERVICES INC.						SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Principal Place of Busin	ness	Mailing Addr	ess Co	<u></u>	-			
5368 WEST VILLAGE DA.								
	FC 336	,			9	7-98 /	42	
If above addresses ar 2. New Principal Office		formation and enter correction below.						
<u></u>	Address, ii Applicable					4. Date Incorporated or Qualified To Do Business in Florida 5/25/90		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. FEI Number Applied For			
City & State			City & State		59-300 8577 Not Applicable			
Zip	Country	Zip	Countr	у 	CERTIFICAT		Additional Fee required a Certificate of Status	
7. Names and Street A	ddresses of Each Officer and	d/or Director (Flo		ations must list at lea	<del></del>			
Name of Officers and/or Directors			Officer and/or Directo 3 (Do NOT Use Post Office Box			City / Stat	a / Zip	
PJ	EANETTE De	14015 Ellesmero		= DR	TAMPA, FL	33624		
D J	EAREHE D	umer	14015	ellesme	re in	TAMPA, A		
					9000024023997 -01/15/9801120001 ****315.00 **** <del>150.0</del> 0 315.00			
						Jan. 13,		
						Jan. 131	`	
Namo						9. Name and Address of New Registered Agent		
MALTER SANders. TAMPA, FL				Street Address (P.O. Box Number is Not Acceptable) 14015 Elles mere 1/1, Suite, Apt. #, Etc.				
•	.,.,			City TAMA	OA	State FL	33624	
	he registered agent of the ab	ove named corpo	ration, am familiar wi	th and accept the ob	oligations of Secti		100	
Signature of Registered Agent	flarette x	EGISTERED AGI	ENT MUST SIGN			Date 1/12	1/98	
11. Does this Dept. of R	corporation pay levenue under S.	any intang . 199.032,	ible tax to th Florida Statu	e utes. Yes	No[	(See other side f on intangil		
this reinstatement ap owed by the corpora	oplication, the reason for diss	iolution has been names of individu	eliminated, the corpo lats listed on this forn	rate name satisfies t n do not qualify for a	the requirements an exemption und	pter 607 or 617, F.S. I further ce of section 607.0401 or 617.0401 ler section 119.07(3)(i), F.S. The	1, F.S., that all fees e information indicated	
SIGNATURE	L ANTE	INTEDNAME OF S	MOL C	IRECTOR	···· · · · · · · · · · · · · · · · ·	1/12/9875	31120002 ******8.75	
	<u> </u>					(8/3/~	164-4406	



5368 WEST VILLAGE DR. TAMPA, FL 33624 OFFICE 813 264-4406 FAX 813 264-4409



pg.2012

JEANETTE DEMARCO

LIC REAL ESTATE BROKER

1/12/98

Dear Ms Alan,

I am sending the reinstatement form along with a check for the fees required. Please take into consideration that my registered agent Walter Sanders, never let me know that the bill had arrived. Mr. Sanders was my accountant until Nov. of 1996 when I changed accountants. I am sure that he received the bill but did not forward it to me because he was angry at me for getting a new accountant. I was only made aware of the dissolution when I applied for a business loan.

While I realize that I am ultimately responsible for my fees being paid, I am asking you to waive the late fees due to the unusual circumstances. I would never have allowed my fees to go unpaid had I been aware that they were due.

Thank you for your time and understanding.

Sincerely,

Jeanette DeMarco President