PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

AP	PLICATION
-	FOR
REIN	STATEMEN



FLORIDA DEPARTMENT OF STATE Jim Sភាith 👢

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

ROSS BROWARNIK ADVERTISING, INC.

Principa Place of Business

5990-8W-1117TH-ST 2203 DAY ACE & NAME FL-82156. MOSUL, FL-33183

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

ii abore aadioooo a.	o moonous many may, and an		
2. New Principal Office	Address, If Applicable	3. New Mailing Office Ad	ddress. I Applicable
Suite, Apt. #, etc.	E-9-	Suite, Apt. #, etc.	9
City & State	,FL	City & State MI	
Zip33133	Country 54	Zip 33133	Country SA

FILED 03 AUG 28 AM 8: 17 SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Date Incorporated or Qualified
 To Do Business in Florida

65-0216908

FEI Number

0)	•	0	3	U	16	L

08/03/1990

Applied For

Not Applicable

Zi336	33	Country	Zip 330	!33	Country	. <i>SA</i>	CERTIFICATE	OF STATUS DESIRED 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)								
Title(s)	2	Name of Officers and/or Directors		Street Address of Each Officer and/or Director				City / State / Zip
D ,	BROWARN	ik, ross	,	5990 SW 111TH ST				MIAMI FL
D	BROWARN	IIK, DIANE		5990 SW 111TH ST			MIAMI FL	
				<u> </u>				0020513883
							09/04/	03+-01071009 **150.00
							300 06/04/0	9020513883 B01030007 **150,00
• • •	8. Nam	e and Address of Current	Registered Age	ent		9. Name and Address of New Registered Agent		
				Name 2055-BLOWARNIK				
HUPERMAN, MARGA ROSS BROWNRULK 1320 S DIXIE HWY 2 703 PAT AUE #9 SUITE 900 COORET GROUG FL				Street Address (P.O. Box Number is Not Acceptable)				
SUTTE 900 COCOCIET 64005 FL					Suite, Apt # Etc.	9		
C ORAL GABLES FL 33146 33C33				3	City CONNET GROVE, State Zip Code 33133			
10. I, being	g appointed th	e registered agent of the ab	e named corp	oration, am	familiar wit			ion 607.0505, F.S. or 617.0505, F.S.

11. 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 of Registered Agen

REGISTERED AGENT MUST SIGN



May 29, 2003

Ref.: Document #L91714

Florida Department of State Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314-6327

Dear Sir:

Please accept my apology for the delay in sending my corporation renewal check. We have relocated our offices during the past year and, thus, did not get forwarded this year's renewal forms.

I have enclosed my check and therefore respectfully request that you reactivate our license and provide us with written confirmation of doing so. I regret if this oversight has caused you any inconvenience and trust you will make note of our new address, which is indicated on the enclosed form as well as at the bottom of this letter.

Sincerely

Ross Browarnik

President.

Cc: Jeffrey Friedman, C.P.A. Marc Kuperman, Esq.



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

June 6, 2003,

(ADVERTISING, INC. 296 LDAY ACENUE, SULTE A 2703 DAY AVENUE MIAMI, FL 33133

SUBJECT: HOSS PROWARNIK ADVERTISING, INC. Hel. Number: L917/4

We have received your document for ROSS BROWARNIK ADVERTISING, INC. and your check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The total amount die to reinstate is \$300.00.

Please affach letter requesting fee abatement along with \$150 check for 2003.

Please return youll locument, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filling of your document, please call (850) 245-6059.

Tyrone Scott Document Specialis

Letter Number: 903A00035546

PLEASE NOTE NEW ADDRESS RECO TENS NOTICE CATE AND TEMPORALLY MODIACED IT DURING OUR RECENT MODB. THANK YOU FOR YOUR GENLENB CONSIDERATION

2055 BROOMPUK

CULL FALLASAS