PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

L96000001351

FILED
97 DEC -3 PM 2:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L96000001351

1. Corporation Name

Kupersmith Limited Company

Principal Place of Business
3410 Galt Ocean Drive
Fort Lauderdale, Fl. 33308

Mailing Address
2460 Overglen Court
East Lansing, MI 48823

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

2. New Principal Office Address, If Applicable
c/o Wampler, Buchanan & Breen
Suite, Apt. #, etc.
555 S. Federal Highway
City & State
Boca Raton, FL. 33432
Zip
33432
Country
USA

3. New Mailing Office Address, If Applicable
4606 7th Street
Suite, Apt. #, etc.
Lubbock, Texas
City & State
79416
Zip
Country
USA

4. Date Incorporated or Qualified To Do Business in Florida
December 30, 1996

5. FEI Number
65-0711662
Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED [ ]
$8.75 Additional Fee required 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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
MEM President	Joel Kupersmith	4606 7th St.	Lubbock, TX 79416
MEM Secretary	Judith Kupersmith	4606 7th St.	Lubbock, TX 79416

REINSTATEMENT 97

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****703.75 ****203.75

8. Name and Address of Current Registered Agent

Jane Maurer
c/o Wampler, Buchanan & Breen
555 S. Federal Highway Ste 430
Boca Raton, Fl. 33432

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City | State FL | 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: Jane L Maurer
REGISTERED AGENT MUST SIGN

Date: 11/20/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes [ ] No [X]

(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 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: Joel Kupersmith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Judith Kupersmith

11/13/97 Date
406-743-3000 Daytime Phone #

11/13/97 Date
806-743-2820X256 Daytime Phone #