PLEASE READ	ALL INST	FRUCTIONS	REFORE C	/i₽[1-11	hdrail ert soo	1 8.7	
APPLICATION FOR		A DEPARTMEN Katherine Ha	NT OF STATE rris			of tivi.	
REINSTATEMENT	Secretary of State VISION OF CORPORATIONS				-		
DOCUMENT # MD5 94	<u> </u>	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	( * z				
KLEIN, TANNEN & COHEN	, P.A.			. دسم	9 JAN 19 AM ECRETARY OF	STATE	
Principal Place of Business	Mailing Addr	ess SAM	íE	TAI	LLAHASSEE.	FLORIUA	
4000 HOLLYWOOD BLVD. SUITE 620N HOLLYWOOD, FL 33021							· Oa
If above addresses are incorrect in any way, line through incorrect information and enter correct.  New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 3. New Mailing Office Address, If Applicable 3.					TATEM	ENT 48	
Suite, Apt. #, etc.	Suite, Apt. #			Date Incorporated or Qualified     To Do Business in Florida     1993			
City & State	City & State		• • • • •	5. FEI Number		•	Applied For
Zip Country	Zip	Country		6.	OF STATUS DESIRED		Not Applicable ional Fee required ificate of Status
7. Names and Street Addresses of Each Officer and	or Director (Flo	<del></del>			). E .		
Title(s) and/or Directors			et Address of Each cer and/or Director e Post Office Box N		. 4	City / State / Zip	
P Norman S. Klein			te 620N				
VP Jay Cohen		4000 Hollywood Blvd. Hollywood, FL 33021 Suite 620N					
Sec./Trea Marc J. Tannen 40			Hollywood Blvd. Hollywood, FL 33021				
						<b>5093</b> 1 3901009 1.00-***	
				ĺ	,		
•					(	X	
8. Name and Address of Current Registered Agent Name				9. Name and A	ddress of New Regi	stered Agent	
KRAMER, ROBERT	11 ft a 4850	Street Address (P	O. Box Number i	s Not Acceptable)		§	
Hollywood, FL	dite 4005	4000 Hollywood Blvd. Suite 485S Suite, Apt. #, Etc.					
	ſ		City Hollyw	00d	· · · · · · · · · · · · · · · · · · ·	FL 330	
10. I, being appointed the redistered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.							
Signature of Registered Agent Date JAV: 5, 1997  REGISTERED AGENT MUST SIGN							
11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes No w (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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Daylime Phone #							