	PI FASE READ	ALL INSTRUCTION	IS REFORE COMP	N ETING THIS EA	DΜ	
	PLICATION FOR ISTATEMENT	FLORIDA DEPARTM Sandra B. M Secretary o DIVISION OF CORI	ENT OF STATE lortham if State		THV.	
DOCUMENT # M40803 1. Corporation Name LAD ASSOCIATES, INC.				99 JUN 14 AM 10: 39		
2. New Pr	addresses are incorrect in any way, line thro incipal Office Address, If Applicable 2-60 WSH-DIYIC Hea	3. New Mailing Office Address	. If Applicable 4. Date	NSTATEME e Incorporated or Qualified Do Business in Fiorida	NT9599 10/29/1986	
Suite, Apt. City & Stal North Zip 38166	minni, Florida	Suite, Apt. #, etc. City & State Floricla, Sun Zip 33179	ny Islas Bagh	59-2090535 RTIFICATE OF STATUS DESIRED [Applied For Not Applicable \$8.75 Additional Fee required for a Certificate of Status	
7. Names	and Street Addresses of Each Officer and/ Name of Officers and/or Directors		Street Address of Each		ıty / State / Zip	
PD	1774		Officer and/or Director Use Post Office Box Numbers)	NORTH MIAMI BE	ACH FL 59179	
D	D WOLF, GRETCHEN		19433 NE 38°C+. 19433 NE 38°C+		Sung Isles Beach, H. 33160 NORTH MIAMI BEACH FL 33179 Sungy IBLES BEACH, F. 3316	
				90000290 -06/17/99 ***1358.)- <i>-</i> 01055022	
8. Name and Address of Current Registered Agent WOLF, DREW 19105 BISCAYNE BLVD. NO. MIAMI BEACH FL 33179 •			Name DREW K Street Address (P.O. Box I 19433 NE Suite, Apt. #, Etc	DREW WOLF Street Address (P.O. Box Number is Not Acceptable) 19433 NE 38 C+. Suite Apt. #, Etc		
10. I, bein Signature Registered	g appointed the registred agent of the about	ye named corporation, am familia UNUL GISTERED AGENT MUST SIGN	ir with and accept the obligations		10199	
12. D	this corporation is a non-p	iny intangible tax to	the	(Sec of	her side for information	
13. I do he lease certify this re	ept. of Revenue under S. ereby certify that the information supplied withe Division of Corporations from any liability that I am an officer or director or the receinstatement application the reason for dissived by the corporation have been paid. To eath.	with this filing is voluntarily furnish by of non-compliance with Section wer or trustee empowered to execution has been eliminated, the	ed and does not qualify for the e 119.07(3)(k) in the event that th cute this application as provided corporate name satisfies the rec	exemption stated in Section 119 le information supplied is deem for in chapter 607 or 617, F.S. quirements of section 607.0401	ed exempt from public access. I I further certify that when filing or 617.0401, F.S., and that all	
SIGNA	TURE: SIGNATURE AND TYPED OR PRI	NED NAME OF SIGNING OFFICER	OR DIRECTOR	6/10/99 30	5-931-2866	