API	PLICATION	ALL INSTRUCTIONS BEFORE FLORIDA DEPARTMENT OF STATE				FILED
FOR		Sandra B. Mortham Secretary of State				0000017 04
REINSTATEMENT		DIVISION OF CORPORATIONS			98 DEC 17 PM 1:51	
DOCUMENT # M43845  1. Corporation Name				SECRETARY OF STATE TALLAHASSEE, FLORIDA		
THE (	600 PLAZA & MOTEL,	INC.,				
	Place of Business NORTH SURF ROAD	Mailing Address 8551 WEST BROWARD BLVD			1	
HOLLYWOOD, FL		STE 304				
33021		PLANTATION, FL 33322			1	
	ddresses are incorrect in any way, line th					
New Principal Office Address, If Applicable		New Mailing Office Address, If Applicable     C/O RAZLA				porated or Qualified ness in Florida 12/24/1986
Suite, Apt. #, etc.		Suite, Apt. #, etc. 22 BOXWOOD ROAD		5. FEI Number		
City & State		City & State HOLLYWOOD, FL			55660 Not Applicab	
Zip	Country	Zip 33021	Count USZ		6. CERTIFICATE	SOF STATUS DESIRED \$8.75 Additional Fee require for a Certificate of Status
7. Name:	s and Street Addresses of Each Officer		Florida nonprofit co	rporations must list a		rs)
Title(s)	Name of Officers and/or Directors 2		Ö	reet Address of Each filcer and/or Director ise Post Office Box N	-	City / State / Zip
T D	SABAH MORAD		545 WATE	RMARK ST		DANIA, FL 33004
VP D	HAIM MORAD		3020 36 AVE			HOLLYWOOD, FL 33021
D P	JOSEPH AMSILI		5345 SW 34TH AVE			FT LAUDERDALE, FL 33312
- · · · · · ·						
					<del>- 3</del> 6	-12/24/9801107003 ****150.00 ****150.00
						M2/21
	8. Name and Address of Current	Registered Age	ent	Name	9. Name and A	Address of New Registered Agent
ADAIR, LARRY L. ESQ ALAN N				ALAN N.	RAZLA, PA P.O. Box Number is Not Acceptable)	
8551	WEST BROWARD BLVD			22 BOXWO		
STE 3	304			Suite, Apt.#, Etc.		·
	ATION, FL 33322 gappointed the registered agent of the	and ada		HOLLYWOO		State Zip Code FL 33021
Signature		boye hamed con	poration, am lamina	u with and accept the	a obligations of s	·
Registered		GISTERED AGE	NT MUST SIGN			Date 12/14/98
	es this corporation pay a pt. of Revenue under S.				No [	(See other side for information on intangible tax.)
filing th that all	is reinstatement application, the reason	for dissolution he paid and the na	as been eliminated mes of individuals !	, the corporate name isted on this form do	satisfies the rec not qualify for a	n chapter 607 or 617, F.S. I further certify that when quirements of section 607.0401 or 617.0401, F.S., n exemption under section 119.07(3)(i), F.S. The ade under oath.
SIGNA	TURE: X) Landen N	Mocad	$\ell$ moti mo	RAD		12/14/98 954 9839394

STF FL32474F.1

## ALAN N. RAZLA, PA

(954) 983 - 9394 Broward (954) 292 - 9246 Broward (954) 983 - 6799 Fax

Florida Office

Email: CHUCHMA@AOL.COM

New Hamp, Office

Alan N. Razla, PA Tax Advisor 22 Boxwood Road Hollywood, FL 33021

NHSCPA Member AICPA Member Alan N. Razla, CPA PA
Certfied Public Accountant, NH
26 South Main Street Suite 521
Concord, NH 03301

15-Dec-98

FI Div of Corporation PO BOX 6327 Tallahassee, FL 32314

Attn: Reinstatment doc no. M43845
The 600 Plaza & Motel Inc.,

Dear Sir or Madam:

Enclosed is the reinstatement form filed for the above corporation. Please be advised that my client did not receive their annual report. It was mailed to their attorney who negligently failed to forward them the report. My client have corrected this matter immediately upon notification that their Company was no longer active. All future reports will no longer continue to be sent to him and he is no longer contracted by my clients.

We ask you to please accept the \$150 check for reinstatement and waive all penalties that resulted from careless acts of my client's attorney.

I thank you in advance.

Alan N. Razla

Alan N. Razla, PA