PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State **DIVISION OF CORPORATIONS** FILED M73872 99 NOV -9 PM 3: 03 DOCUMENT # 1. Corporation Name SECRETARY OF STATE TALLAHASSEE, FLORIDA SEAGON CORP. Principal Place of Business Mailing Address 301 CLEMATIS ST SUITE 704 3000 301 CLEMATIS ST SUITE 204 SUITE 104 3000 WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 If above addresses are incorrect in any way, line through incorrect information and enter correction below 2 New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified
To Do Business in Florida 03/25/1988 Suite, Apt #, etc Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State 65-0038168 Not Applicable \$8.75 Additional Fee required for a Certificate of Status Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director City / State / Zip Title(s) SUITE 204 Suite 3000 PST GSCHWEND, RALF D. WEST PALM BCH. FL 200003050572--9 -11/22/99--01020--003 ****150,00 ****150.00 SP 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent GSCHWEND, RALF Street Address (P.O. Box Number is Not Acceptable) **301 CLEMATIS ST** SUITE 204 3000 Suite, Apt. #, Etc. WEST PALM BEACH FL 33401 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. Tresident REGISTERED AGENT MUST SIGN 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 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.

0066948

Seagon Corporation

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301 Clematis Street, Suite 3000 West Palm Beach, FL 33401 561-655-2745

October 14, 1999

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

RE:

Document #M73872

Administrative Dissolution

Dear Sir or Madam:

We are in receipt of your notice of corporate dissolution. After contacting your office, the representative informed my bookkeeper that both our first and second notice of Annual Report were returned to your office as undelivered.

She also informed us that we could simply pay the \$150.00 filing fee instead of the \$750.00 reinstatement fee due to the mailing problem. We have noted our new address and will look for our annual notices in January, 2000.

Thank you for your assistance.

Sincerely,

RALF GSCHWEND President