FOR			DA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED		
1. Corpc	CUMENT # N312 Pration Name F PALM BEACH HOUSIN	OPMENT, INC.			98 APR 17 PM 12: 07 SECTIFE OF STATE TALLALI COLE, IT ORIDA		
Principal Place of Business Malling 2424 NORTH CONGRESS AVE. 2424 NO BAY J BAY J			Address DRTH CONGRESS AVE. PALM BEACH FL 33409				
	e addresses are incorrect in any way, line t Principal Office Address, If Applicable		ling Office Address, I		4. Date Incor To Do Bus	porated or Qualified siness in Florida 03/	21/1989
		City & State			5. FEI Numb	^{er} 52-1642176	Applied For Not Applicable
		Zip			6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status		
TRE(0)			Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)		h r	City / State / Zip	
PD	LAMBERT, ROGER C	2424		NTOWN ROAD, #200 NOKTH CANGREST		WEST PALM ABACH, FL 37	
D TD	0		2424 NORTH CONGRESS AVE. 3450 Cumberland Circle, Ste Atlanta, GA 30339 2424 NORTH CONGRESS AVE.		WEST PALM BEACH FL 33409 40002498574-5		
			REINS	STATE	VENT.	-04/23/980 ****297.50 97-98	1123005 ****297.50
	8. Name and Address of Curren	t Registered Age	ent		9. Name and	Address of New Registered A	4-7-98 gent
LAME	BERT, ROGER C. ESQ. W: INDIANTOWN ROAD ユスソフ	IENCH 23 CM FLOCION	Name Street Address (P.O. Box Number is Not Acceptable)				
#200 UUPF	TER FL 80458- WEST PI	Sulte, Apt. #, Etc. City		,	State Zip Code		
0. I, bei	ng appointed the registered agent of the	eve named corp	ation, am familiar w	Ith and accept the o	bligations of Sec	tion 607.0505, F.S.	

was remissioned 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. LOU C. Lamber PRESIDENT SIGNING OFFICER OR DIRECTOR

10/27/97 561-486-3040 Date Daytime Phone #