


FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 00 NOV -2 PM 2:09

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **N94000004529**

1. Corporation Name
THE SFPC CORPORATION

Principal Place of Business	Mailing Address
8000 SW 104 ST MIAMI FL 33137 US	8000 SW 104 ST MIAMI FL 33137 US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.



2. New Principal Office Address, if Applicable 1215 East Broward Blvd. Suite, Apt. #, etc. N/A	3. New Mailing Office Address, if Applicable 1215 East Broward Blvd. Suite, Apt. #, etc. N/A
City & State Fort Lauderdale, FL	City & State Fort Lauderdale, FL
Zip 33301	Country USA

4. Date Incorporated or Qualified To Do Business in Florida	09/09/1994
5. FEI Number	65-0609043
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director	4. City / State / Zip
DI-DV	PRYOR, WENDE William Dyer	1320 NW 96TH TERR 20530 NW 7 ST	PEMBROKE PINES FL 33024 33029
DV-DT	WATSON, MICHAEL John Jordan	12122 SW 116TH ST CIRCLE SOUTH 9330 NE 20th Street	KENDALL FL 33106 Pembroke Pines, FL 33024
D	BELLMAN, RALPH	4610 SW 106TH AVE	FT LAUDERDALE FL 33331
DS	RADIS, RICHARD A	1215 E. BROWARD BLVD.	FT LAUDERDALE FL 33301
DV-DP	PRUITT, DAVID Tom Naelon	5405 NW 82 AVE 6101 Palm Trace Drive	MIAMI FL 33106 Davie, FL 33314
D	WALKER, KENNETH	7081 HARDING ST	HOLLYWOOD FL 33024

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
RADIS, RICHARD 1215 E BROWARD BLVD 2 FL FT. LAUDERDALE FL 33301	Name 300003469623 Street Address (P.O. Box Number is Not Accepted) 20700 11017 114 Suite, Apt. #, Etc. ***245 KIN ***245 00 City State FL 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.

Signature of Registered Agent: *Richard Alan Radis* Date: October 13, 2000

RICHARD ALAN RADIS 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 118.07(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: *Richard Alan Radis* Date: 9/13/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 RICHARD ALAN RADIS

(954) 524-6738