REIN	PLEASE READ PLICATION NO STATEMENT # N9600	6 lb	Sandra B. Mo Secretary of vision of corpo	ENT OF STATE ortham State	185	ING THIS FORM. FILED  8 JAN - 2 PN 2: 1 CONTARY OF STAT	15
1. Corporation Name  GATEKEEPERS INTERNATIONAL, INC.						TEMA	<i>H</i>
Principal Pi	ace of Business	ess					
1	/N POINT ROAD LLE FL 32257	3683 CROWN POINT ROAD JACKSONVILLE FL 32257					
	iddresses are incorrect in any way, line thi ncipal Office Address, if Applicable					orated or Qualified	
Sulte, Apt.	#, etc.	Sulte, Apt. #, etc.			4. Date Incorporated or Qualified To Do Business in Florida  08/07/1996		
City & State	)	City & State			5. FEI Number	, 128105	Applied For  Not Applicable
Zip Country		Zip	p Country		6.		
7. Names	and Street Addresses of Each Officer and	or Director (Flo	···-				
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box Numbers)			City / State / Zip		
D	NEALIS, ARLENE	3683 CROWN POINT ROAD			JACKSONVILLE FL 32257		
D	HENDERSON, CHERYL	8380 BAYMEAD	OOWS ROAD #11		JACKSONVILLE FL 32256		
D	HENDERSON, ED	8380 BAYMEADOWS ROAD #11			JACKSONVILLE FL 32256		
		9			00002391579		
ţ							16/1/198
8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name							- <del></del>
. YONG FRANK LESO					O Barristan	Is Also Associated	(897
<del>225 WATER-STREET #1235</del> J <del>acksonville fl 3220</del> 2				Street Address (P.O. Box Number is Not Acceptable)  1050 RIVERSIDE AVENUE  Sulte, Apt. #, Etc.			
			Total Service and Administrator Lay of Selfs Administration	Sity Jackson	nile	State FL	Zip Code 32204
_	appointed the registered agent of the abo	ove named corpo	oration, am familiar t	with and accept the ot	bligations of Secti		
Signature o Registered		JISH YED AG	FNT JUST SIGN			Dato 12/9/97	
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No No (See other side for information on Intangible tax.)							
this rein	that I am an officer or director or the recei statement application, the reason for disso the corporation have been paid and the application is true and accurate, and my si-	olution has been names of Individ	eliminated, the corp uals listed on this fo	corate name satisfies frm do not qualify for	the requirements an exemption und	of section 607.0401 or 617.04	101, F.S., that all fees
SIGNATURE:   SIGNATURE:   SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date Daylinic Ptione #							

GATEKEEPERS INTERNATIONAL, INC.

F.I.N. 59-3428105
3683 CROWN POINT ROAD
JACKSONVILLE, FL 32257
904-292-0288
FAX 904-292-0937

November 18, 1997

Florida Division of Corporations Annual Report/Reinstatement Section P.O. Box 6327 Tallahassee, FL 32314-6327

Dear Reinstatement Section,

Gatekeepers International respectfully requests to have the reinstatement fee for the Florida Annual Report waived. We never received the annual report filing form and brochure from the state for 1997.

We appreciate your consideration in this matter. Thank you very much.

Sincerely,

Arlene Nealis