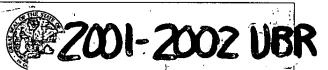
PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLIZATION FOR



FILED

02 MAR -4 PM 1:50

10/2

DOCUMENT #	P00000076097
------------	--------------

1. Corporation Name

INTERNATIONAL FLIGHT MANAGEMENT, INC.

6	-	(5	

Mailing Address

		SEC TALL	RETA AHAS	RY O SEE.	F STA FLOR	TE IDA	
1	R						
V							

Fillicipal Flace of Busili	693	Mailing Audi	೮ಎಎ	4			
If above addresses are incorrect in any way, line through incorrect in		PINES FL 33029 information and enter correction below. iling Office Address, If Applicable					
				9301 4. Date Incorp To Do Busin	9078 050 orated or Qualified ness in Florida 0	08/10/2000	
Julie, Apr. #, etc.			#, etc.		5. FEI Numbe	r	Applied For
City & State		City & State			65-19	30957	Not Applicable
Zip	Country	Zip	~~~	Country	CERTIFICATE	OF STATUS DESIRED.	B75FAdditional Fee required -for a Cortificate of Status ==
7. Names and Street Ad	tdresses of Each Officer an	d/or Director (Flo	rida nonprof	it corporations must list at le	ast 3 directors)		
Title(s) Name of Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip		
PSTD RODRIGU	EZ, DINORAH		20841 NV	20841 NW 2 STREET		PEMBROKE PINES FL 33029	
					AK-	-04/03/02-	00398 -0063005) ****150.00
8. Nan	ne and Address of Curren	t Registered Age	nt		9. Name and A	Address of New Registered	Agent
RODRIGUEZ, DINORAH 20841 NW 2 STREET PEMBROKE PINES FL 33029		Suite, Apt. #, Etc	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc.				
				City		Stat	
10. I, being appointed the Signature of Registered Agent	e registered agent of the ab	Rudu	eration, am fa	amiliar with and accept the o	bligations of Secti	on 607.0505, F.S. Date	21

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/01

954-646-123

Daytime Phone #



2012

INTERNATIONAL FLIGHT MANAGEMENT, INC. P.O. Box 297336 • Pembroke Pines, Florida 33029

TELEPHONE 954.646.1233

November 20, 2001

RE: International Flight Management, Inc.

Document # P00000076097

Gentlemen:

We just received your notice of dissolution to our surprise. We mailed our form and check on January 25, 2001. The check was cashed on February 2 (see attached copy of check). We never received notification of any problem. With receipt of this notice I called and was informed that my signature was missing.

Attached you will find our reinstatement application with the appropriate signature.

Your prompt attention to this matter is appreciated.

Sincerely,

Denoial Rodriguez

President