## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT	FLORIDA DEPARTMENT OF STATE  Katherine Harris  Secretary of State  DIVISION OF CORPORATIONS	FILED  02 JAN II AM 10:31  _SECRETARY OF STATE
DOCUMENT # PODDOOO O DO D		TALLAHASSEE, FLORIDA
INC .		
2. Principal Office Address  Q112 BROAD ST	3. Mailing Office Address 9112 BROND ST	PENSTATEMENT <u>01-02</u>
Suite, Apt. #, etc.  City & State	Suite, Apt. #, etc.  City & State	4. Date Incorporated or Qualified - To Do Business in Florida
BOCA RATION, FL	COCA RATON, FC	5. FEI Number  V Applied For Not Applicable
33434 USA	33134 USA	CERTIFICATE OF STATUS DESIRED  58.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent Name		
MARC BLON STEIN  Street Address (P.O. Box Number is Not Acceptable)  Suite, Apt. #, Etc.  City  State   Zip Code		
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.		
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.  Signature of Registered Agent  REGISTERED AGENT MUST SIGN		
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)		
Titles Name of Officers and/or Directors	Street Address of Each Officer and/or Director	
P MARC BRONSTEIN	O 9112 BROADST	BOCA RATON, FL, 33484
		M(I)
		11100
10. 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 filling 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 name 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:  OLDO2  S6/-542-7574		
SIGNATURE: MARC BRONSTEIN 61/02 56/-542-7574  Date Dayline Phone #		