


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
FILED

02 APR 26 PM 12:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100005556071--7
-05/17/02--01006--011
*****300.00 *****300.00

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P 000000 92253			
1. Corporation Name A Santis Corp 1861 N. Federal Hwy #223 Hollywood FL 33020			
2. Principal Office Address 1861 N. Federal Hwy Suite, Apt. #, etc. 223 City & State Hollywood FL Zip 33020 Country Broward		3. Mailing Office Address <i>Same</i> Suite, Apt. #, etc. <i>Same</i> City & State <i>Same</i> Zip <i>Same</i> Country <i>Same</i>	

4. Date Incorporated or Qualified To Do Business in Florida 10/29/01	
5. FEI Number 65-1043686	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name James T. McGonigle	
Street Address (P.O. Box Number is Not Acceptable) 6221 Banyan Terr	
Suite, Apt. #, Etc.	
City Plantation	State FL Zip Code 33317

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 *James T. McGonigle* Date 4-22-02
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	City / State / Zip
P/S/T	Alfredo Santis teben	1861 N. Federal Hwy #223	Hollywood FL 33020

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 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: *Alfredo Santis teben* 954-
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4-22-02 243. 5111
Date Daytime Phone #

CR2E081 (9/01)



James T. McGonigle, PA
7027 W. Broward Blvd. PMB #280
Plantation, FL 33317

954-583-6666

Fax 954-584-5313

April 22, 2002

Florida Department of State
Division of Corporations
P O Box 5327
Tallahassee, FL 32314

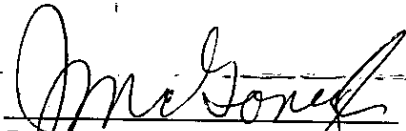
Re: A Santis Corp.
ID 65-1043686

Sir:

The above referenced corporation never received notification for renewal for years 2001 or 2002. We understand that several corporations were not notified of the renewal for these years. Therefore, enclosed is a check for \$300.00 from the owner. Please accept this as renewal fee for both years.

We are also enclosing a UBR renewal form.

Sincerely,


James T. McGonigle, PA