PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

P00000111877 DOCUMENT #

1. Corporation Name

CHARTER INTERNATIONAL GROUP, INC.

Principal Place of Business

Mailing Address

8524 PALM PARKWAY ORLANDO FL 32836

8524 PALM PARKWAY ORLANDO FL 32836

SECRETARY OF STATE DIVISION OF CORPORATES

03 OCT 15 AM 9: 12

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If above addresses are incorrect in any way, line through incorrect information and enter correction below.							10/15/050105502/ **8.75				
2. New Principal Office Address, If Applicable			e Address, If Applicable 3. New Mailing Office Address, If Applicable		4.		porated or Qualified iness in Florida		2/04/20	<u> </u>	
			Suite, Apt. #, etc.		5. FEI Numbe				12/04/2000		
										Applied For	
			City & State			<u></u>		59-3689081			Not Applicable
Zip Country		Zip	6.			CERTIFICATI	ATE OF STATUS DESIRED		\$8.75 Additional Fee require for a Certificate of Status		
7. Names	and Street	Addresses of Each Officer an	d/or Director (Flo	rida nonprofi	t corporations must list at le	ast 3	directors)				
Title(s)	Name of Officers and/or Directors			Street Address of Each Officer and/or Director				4	City /	State / Zip)
D	PICHI FR. RONALD 8524 PALM PARKWAY					ORLANDO EL 3	2836				

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		REINST	atement 03
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8. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State Zip Code FL

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. or 617.0505, F.S.

Signature of

PICHLER, RONALD

8524 PALM PARKWAY

ORLANDO FL 32836

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 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

9. Name and Address of New Registered Agent

CHARTER INTERNATIONAL GROUP, INC.

A Licensed Real Estate Broker

OCTOBER 09, 2003

TO WHOM IT MAY CONCERN:

THE TWO PRIOR UNIFORM BUSINESS REPORTS (UBR) NOTICES WERE NEVER RECEIVED.

ENCLOSED IS THE COMPLETED APPLICATION FOR REINSTATEMENT DOCUMENT# P00000111877 FOR CORPORATION NAME "CHARTER INTERNATIONAL GROUP, INC." ALONG WITH A CHECK #1292 FOR \$150.00 FOR THE FILING FEE AND CHECK #1297 FOR \$8.75 OR A CERTIFICATE OF STATUS.

PLEASE WAIVE THE REINSTATEMENT FEE.

THANK YOU FOR YOUR ASSISTANCE.

RON PICHI ER

PS: IF YOU NEED TO CONTACT ME BY PHONE, I CAN BE REACHED DIRECTLY AT 407-791-3338 OR 407-592-3222

RON PICHLER / BROKER - REALTOR
CHARTER INTERNATIONAL GROUP, INC

A Licensed Real Estate Broker

8524 PALM PARKWAY / ORLANDO / FL / 32836 / U.S.A.

Phanes 407 230 1111 / From 407 230 6777 /

Phone: 407.239.1111 / Fax: 407-239-6777 /
eMail: margritpich@aol.com Website: www.cigvacationhomes.com