PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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	RPORATION STATEMENT		Secretai	TMENT OF STATE ry of State CORPORATIONS				LED			
DOCUMENT #P0000012737						05 FEB - 1 PM 2: 00					
1. Corporation Name						SECRETARY OF STATE TALLAHASSEE, FLORIDA					
Here and Now Structure Restoration, Inc.											
2. Principal Office Address 332 SW 165t.			3. Mailing Office Address South		REM	STA	TEME	NT 03	-05		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		4. Date Incom			97 O 00			
City & States FT. Laudendale, Florida			City & State Same		5. FEI Number Applied For Not Applied be						
^{Zip} 333	33312 Broward		Same			6. CERTIFICATE OF STATUS DESIRED 58.75 Additional Fee required for a Certificate of Status					
7. Name and Address of Current Registered Agent											
	Name Sean Dannelly										
	Street Address (P.O. Box Number is Not Acceptable)										
Suite, Apt. #, Etc. 11/1								·			
	City [7]					State	Zip Code				
	Ft.Lauderdale						33309				
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 o Registered		1 /21/	Teigal		Date	1-28	3-05	CRZEO81 (01/05)			
RÉGISTERED AGENT MUST SIGN 8. Names and Street Addresses of Rach Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)											
Titles	Name of Officers and/or Directors		io productions	Street Address of Each Officer and/or Director			Ch. (Ch.)				
BD	Merlin D). Underw	ood 332	33215W 16 Street			Ft. Landerdale, Fl 33312				
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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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date											
	SIGNATUR	E AND TYPED OR PRO	NTED NAME OF SIGNING OF	FICER OR DIRECTOR		Date	Đ	sytime Phone #	ı		

HERE AND NOW STRUCTURE RESTORSTION, INC. 3321 SW 16TH STREET FT. LAUDERDALE, FL 33312 (954) 593-0723

01/28/05

TO WHOM IT MAY CONCERN,

NO RE –FILLING NOTINE FOR INCORPORATION STATUS WAS RECIVED BY THIS OFFICE FOR 2003 UNTIL PRESENT.

THANK YOU,

MERLIN D. UNDERWOOD-PRESIDENT/OWNER