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co	RPORATION	FLORIDA DEPARTMENT OF STATE		1			
REIN	NSTATEMENT		Secretary of State		04 FEB -9 PM 1:23		
		DIVISION	OF CORPORATIONS	1			
	INTERIT U DOGGGGG		<del></del>	†	SECRETARY TALLAHASSE	OF STATE	
	JMENT # P000001  Dration Name	15/59		1		· CAIDA	
,				1.			
Hasti	ngs Corporation			1		. 2	
				DEINS	て入ててる様を	N 02-04	
2 Princi	ipal Office Address	3. Mailing Office A	uddress				
, ±	N. 28th Terrace	· [	3790 N. 28th Terrace		<b>002843</b>	6121 30 **1050.00	
Suite, Apt.	<del></del>	Suite, Apt. #, etc.			<u>, , , , , , , , , , , , , , , , , , , </u>	20 ************************************	
		}			rated or Qualified	10/0000	
City & Stat	te	City & State			12/19/2000		
	wood, FL	Hollywood	<del></del>	58-2595	929	X Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE C	F STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status	
33020	) USA	33020	USA	<del></del>		for a Centificate of Status	
	Name	7. Name ar	d Address of Current Regist	ered Agent			
	Kenneth A. Welt	, Bankrupt	cy Trustee				
	Street Address (P.O. Box Number	<del>, , , , ,</del>					
r.	3790 N. 28th Terrace						
	Suite, Apt. #, Etc.			·		i	
1,	City			7	State Zip Code		
	Hollywood				<b>FL</b>   33020	,	
8. I, bein	ng appointed the registered agent of	he above named corpora	ation, am familiar with and acce	ept the obligations o	f section 607.0505 or 6	17.0503, F.S. 2-04	
Signature Registered		)			Date 1-28	1-04	
		REGISTERED AGENT					
		TRESIONE FREE TIGET	MUST SIGN				
9. Name	es and Street Addresses of Each Offi			list at least 3 directo	<del> </del>		
9. Name	es and Street Addresses of Each Offi Name of Officers and/or Direc	er and/or Director (Flori		ch	rs)	State/Zip	
Titles	Name of Officers and/or Direct	er and/or Director (Flori	da nonprofit corporations must Street Address of Eac Officers and/or Direct	ch or	rs) City/s	State/Zip	
Titles	Name of	er and/or Director (Flori	da nonprofit corporations must Street Address of Eac	ch or	rs)	State/Zip	
Titles	Name of Officers and/or Direct	er and/or Director (Flori	da nonprofit corporations must Street Address of Eac Officers and/or Direct	ch or	rs) City/s	State/Zip	
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Titles	Name of Officers and/or Direct	er and/or Director (Flori	da nonprofit corporations must Street Address of Eac Officers and/or Direct	ch or	rs) City/s	State/Zip	
Titles	Name of Officers and/or Direct	er and/or Director (Flori	da nonprofit corporations must Street Address of Eac Officers and/or Direct	ch or	rs) City/s	State/Zip	
Titles M	Name of Officers and/or Direct Kenneth A. Welt	cer and/or Director (Flori	da nonprofit corporations must Street Address of Eac Officers and/or Direct	rrace I	rs) City/s	State/Zip FL 33020	
Titles M	Name of Officers and/or Direct	cer and/or Director (Florings) ors  37	da nonprofit corporations must  Street Address of Eac Officers and/or Direct  90 N. 28th Te	rrace I	rs) City/s lollywood,	FL 33020	
Titles  M  10. I certi when 617.0	Name of Officers and/or Direct Kenneth A. Welt filming this reinstatement application, 401, F.S., that all fees owed by the c	e receiver or trustee em the reason for dissolution	street Address of Eac Officers and/or Direct  90 N. 28th Te	rrace I	in chapter 607 or 617, at the requirements of so	F.S. I further certify that ection 607.0401 or imption under section	
Titles  M  10. I certi when 617.0	Name of Officers and/or Direction A. Welt Menneth A. Welt filling this reinstatement application,	e receiver or trustee em the reason for dissolution	street Address of Eac Officers and/or Direct  90 N. 28th Te	rrace I	in chapter 607 or 617, at the requirements of so	F.S. I further certify that ection 607.0401 or imption under section	
10. i certi when 617.0 119.0	Name of Officers and/or Direct Kenneth A. Welt Melt I am an officer or director or the filling this reinstatement application, 401, F.S., that all fees owed by the corollary in	e receiver or trustee em the reason for dissolution	Street Address of Eac Officers and/or Direct  90 N. 28th Te  powered to execute this applicate has been eliminated, the corp of and the names of individuals are and accurate, and my signal	ation as provided for orate name satisfies listed on this form of ture shall have the s	in chapter 607 or 617, a the requirements of si lo not qualify for an exe ame legal effect as if m	F.S. I further certify that section 607.0401 or imption under section ade under oath.	
M  10. i certi when 617.0	Name of Officers and/or Direct Kenneth A. Welt Melt I am an officer or director or the filling this reinstatement application, 401, F.S., that all fees owed by the corollary in	ter and/or Director (Floridors)  37  are receiver or trustee emplies reason for dissolution proporation have been paid on this application is true.	powered to execute this applicant has been eliminated, the corp d and accurate, and my signal (Bankruptcy I	ation as provided for orate name satisfies listed on this form of ture shall have the s	in chapter 607 or 617, si the requirements of so to not qualify for an exercise mene legal effect as if meaning the state of the state	F.S. I further certify that section 607.0401 or imption under section ade under oath.	