DOCQ KQTDN, F 41-202(343 Not Applica  Zip Country 33432 USA CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee req for a Certificate of Status  7. Name and Address of Current Registered Agent  Name  Fred Cohen  Street Address (P.O. Box Number is Not Acceptable)		PORATION STATEMENT		DEPARTMEN Secretary of S	tate	05	FILED JAN 14 AH 8	
2. Principal Office Address  4901 Su 18th St  6901 Su 18th St  6902 Raton, FI  6902 Raton, FI  6903 Suste Bocq Raton, FI  7. Name and Address of Current Registered Agent  8. Suste, Apt. #, Etc.  City North Patm Bocch  City A State  8. Libeling appointed the registrant propert of the above printed corporation, and targeter with and accept the obligations of section 607.0505 or 517.0503, F.S.  Signature of Registered Agent  7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  8. Name of Figure Agent Agent Size Agent Name of City / State / Zip  7. Name and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  8. Name of Officers and/or Director (Florida nonprofit corporations must list at least 3 directors)  7. Name and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  7. Name and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  7. Signature of City / State / Zip  8. Name of City / State / Zip  9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  8. Name of City / State / Zip  8. Name of City / State / Zip  9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)	1. Corporat	tion Name				SEC TALI	RETARY OF STAT LAHASSIE, ELOZI	TE Tub
Suite, Apt. #, etc.    O    Suite   Apt. #, etc.   IO		· · · · · · · · · · · · · · · · · · ·				1	, .	
City & State BOCQ Rotton, F1  Special Rotton, F1  Zip 33433  Country  Zip 33433  Country  Zip 33433  Country  Zip 33433  Country  To Applied For  Certificate of Status Desired    Street Address (P.O. Box Number is Not Acceptable)  Tia us Highway One  City  North Patm Boch  City  North Patm Boch  Signature of Registered Agent  Signature of Registered Agent  P. Names and Street Addresses of Each Officer and/or Director (Fiorida nonprofit corporations must list at least 3 directors)  Titles  Officers and/or Directors  P. D. Innel 19, Alan  L. Apolied For  Screttificate of Status Desired  State   Directors    State   Zip Code  FL   33408  8. 1, being appointed the registered agent of the above surfact corporations must list at least 3 directors)  Signature of Registered Agent  Screttificate or Status Desired  State   Agent    P. Names and Street Addresses of Each Officer and/or Directors  Officers and/or Directors  Officers and/or Directors  P. D. Innel 19, Alan  L. Apolied For  Screttificate of Each Officer and/or Directors  Street Address of Each Officer and/or Director  City / State / Zip  Docq Rotton, F1 3343  V. Innel 19, Linda  L. Apolied For  Screttificate of Each Officer and/or Director  Street Address of Each Officer and/or Director  Street Address of Each Officer and/or Director  Street Address of Each Officer and/or Director  City / State / Zip  Screttificate of Each Officer and/or Director  Street Address of Each Officer and/or Director  Street Address of Each Officer and/or Director  Street Address of Each Officer and/or Director  Screttificate of Each Officer and/or Director  Street Address of Each Offic	6901	sw 18th St	6015	. Federal Huy				
Country   Say	City & State		City & State		F1	5. FEI Numbe	ness in Florida 5	Applied For
Street Address (P.O. Box Number is Not Acceptable)  TIA US HIGHWAY ONE  Suite, Apt. #, Etc.  City North Patm Bacm  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  Officers and/or Directors  PD Inniel 19, Alan  L901 Sw 18th St Ste 101  Baca Raton, F1 3343  SUIDD-45451759	334	33 Country USA	1 '		USA	6.	0	
8. I, being appointed the registered agent of the above parties corporation, an familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.  Signature of Registered Agent  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  Name of Officers and/or Directors  PD Innella, Alan  L901 Sw18 <sup>th</sup> St Ste 101  Boca Raton, F1 3343  V Innella, Linda  L901 Sw18 <sup>th</sup> St Ste 101  Boca Raton, F1 3343		Street Address (P.O. Box Number 112) Suite, Apt. #, Etc.	Fred ( is Not Acceptable) US Hig	Cohen hwey o			U3/1)5	-005 ** 50.1
Titles Officers and/or Directors  Street Address of Each Officer and/or Director  PD Innella, Alan Land Land Land Land Land Land Land La	Signature o Registered	appointed the registered agant of the	REGISTERED A	oration, an familian			on 607.0505 or 617.0503, F	,S.
V Innella, Linda 6901 Sw 18th St Ste 101 Boca Ration, Fl 33433		Name of			Street Address of E	ach	City / S	tate / Zip
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The Real Estate Leaders

January 10, 2005

Florida Department of State Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

## To Whom It May Concern:

Enclosed you will find four Corporate Reinstatement applications. On December 27, 2004 my application for a Fictitious Name Renewal was returned to me due to the fact that the corporation named as the owner was inactive. I was never notified that the enclosed four corporations were up for renewal of that they had expired. Per a phone conversation with the State I was instructed to file a reinstatement for the four corporations and include four checks in the amount of \$150.00 each. I was also instructed to include the original Fictitious Name Application. I followed all these instructions and the paperwork was received by the State on December 31, 2004. On January 10, 2005 I received all the applications back again stating it would cost an additional \$600.00 to reinstate them. I again called the State and was instructed to send another letter attached to each reinstatement with an explanation and requesting that the reinstatement fees be waived due to the fact I never received notification of the renewal. Even though the four applications were returned the original four checks #3796, #3795, #3794, #1143 in the amount of \$150.00 each were not returned. Therefore I am requesting these checks be applied to the four 2004 renewal and that the reinstatement fees be waived. I have also enclosed four additional checks in the amount of \$150.00 each for the 2005 renewals.

If you have any questions regarding this matter please call me at 561-394-7800

Alan R. Innella Broker/Owner

RE/MAX Advantage Plus

## **RE/MAX Advantage Plus**