PLEASE READ ALL INSTRUCTIONS BEFORE COM

FILED Jun 18, 2002 8:00 am Secretary of State

06-18-2002 90484 012 ***150.00

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT#

1. Corporation Name P010000	70166		/			
INVESTORS REAL ES	TATE CORP.					
	•			869	339	
2. Principal Office Address See	3. Mailing Office Address		┥.		, , ,	
1050 CAPISTRANO	-	1050 CAPISTRANO				
Suite, Apt. #, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		4. Date Incorporated or Qualified To Do Business in Florida 07/17/01		
City & State	City & State					
WESTON, FLORIDA	WESTON-	ORTDA	5. FEI Number		Applied For	
ip Country .	Zip	Country	6.	65-1128188	Not Applicable	
33326 J USA	33326	USA	CERTIFICATE OF	STATUS DESIRED \$8.75	Additional Fee required Certificate of Status	
	7. Name and Ad	dress of Current Regis	tered Agent		, care or oracus	
Name			-		-	
CLEVENGER, D		<u> </u>	• • • • • • • • • • • • • • • • • • •			
Street Address (P.O. Box Number is I	· · · · · ·	01-11	01)		,	
Suite, Apt. #, Etc.	16091	D/ATT	1210d			
#303		· · · · · - · · · · · · · · · · · ·				
City WESTON	* * * * * * * * * * * * * * * * * * *		Sta			
				<u> .5552</u> 0	**	
gnature of egistered Agent (R)	ove named corporation, am fam	ma		7.0505 or 617.0503, F.S.	= 02	
Names and Street Addresses of Each Officer and		-				
Titles Name of		Street Address of Ea				
Officers and/or Directors	Officer and/		or .	City / State / Z	īp i	
D CLEVENGER, DAVID		Blatt B	100 #303 F	Thander	date	
WESTON, No. 33586				P/A-33.	326	
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face on the last to the second		·		remain hayan isasa kan ayan ayan ay		
I certify that I am an officer or director or the receiv	/Ar or trustee empowered to exc	anda Hele and I sadi				

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 cath.

SIGNATURE:

Attachment

869339

Investors Real Estate

P.O. Box 551588 Fort Lauderdale, Florida 33355 Office (954) 581-6700 Fax (954) 389-8242

June 5, 2002

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Uniform Business Report Division of Corporations P. O. Box 1500 Tallahassee, Florida 32302=1500

RE: INVESTORS REAL ESTATE CORP. FEIN# 65-1128188

Dear Sir or Madam:

Enclosed please find a Uniform Business Form for Investors Real Estate, Inc. The company never received the UBR Form for 2002. I called your office to discuss this problem. Pursuant to that conversation I am respectfully asking for an abatement of penalties. Also please find enclosed a check in the amount of \$ 150 for the year 2002.

I want to thank you for all of the help that was given to me. If you have any questions, please contact me at the above telephone number.

Very Truly Yours,

David T Clevenger

ww.cor02. UBR REINSTATEMENT-LTR