PLEASE READ ALL INS	TRUCTIONS	BEFORE C	OMPLET	ING THIS FO	RM.	4	
	lim Smith			12-			
Division of corporations			FILED				
DOCUMENT # P0100088862			02 OCT 28 AM 9:08				
STUDENT MARKETING INC.			SECRETARY OF STATE TALLAHASSEE, FLORIDA				
				TALLANASSI	IE, FLURDA		
Principal Place of Business Mailing Ad	Mailing Address			an munum andra munum munum munum	AALDA IRIAL INING ANNA RI	112 0 118012008	
	4340-A FORTUNE PLACE MELBOURNE FL 32904						
If above addresses are incorrect in any way, line through incorrect information and enter correction below.			9/3/2002 - 90165-025 \$55000				
2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 4315 Wood and Park Dr 4315 Wood and Park Dr			4. Date fhcorp	orated or Qualified tess in Florida	09/10/2001		
Suite, Apt. #, etc.	Secon		5. FEI Number	_	Ar	oplied For	
West Melbourne, FL West	1.6	.FL	<u>59-3</u>	3748092		ot Applicable	
Zip Country Zip 32904 USA 3290	NA Country US		•	E OF STATUS DESIRED	58.75 Additiona for a Certifica		
7. Names and Street Addresses of Each Officer and/or Director (F	lorida nonprofit corpora						
Title(s) Name of Officers and/or Directors Street Address of Eac Officer and/or Director 1 2 and/or Directors 3				C 4	ity / State / Zip		
D MARJORIE MILO	4315 Woodland Par			West Mell	source, Fl	32904	
	3200 BIRD SONG			MELBOUR	NE, FL	2934	
D Terry Harrison 1 792 Carroll Av			2 M 16 P	ST PAUL			
D David R. Beaudet			enve ST. PAUL, MN 55704				
			800009026118 11/15/0201080008 **8.75				
			11/13/				
· · · · · · · · · · · · · · · · · · ·							
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent				
MILO, MARJORIE			(8/02)				
4340-A FORTUNE PLACE MELBOURNE FL 32904		Street Address (P.O. Box Number is Not Acceptable)				CR2E040 (8/02)	
		Suite, Apt. #, Etc.				0	
City			State Zip Code				
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 Registered Agent MCGALATURE GEQUIRED Date October 22,2002							
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.							
18							
SIGNATURE: SIGNATUREAND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # X431							

Student Marketing, Inc.



October 22, 2002

RE: Document # P01000088862

To Whom It May Concern:

Enclosed is an application for reinstatement for Student Marketing, Inc. An annual report (UBR) was filed on August 28, 2002 and a fee of \$550 submitted (copy of receipt attached). After discussing the situation with your department, it was determined no further fee was required however, I am enclosing an additional \$8.75 for a Certificate of Status. Thank you for your prompt attention to this matter.

Sincerely, Jim Frisinge Zontroller Student Marketing, Inc.

Enclosures (3)

JF/cw

4315 Woodland Park Dr. West Melbourne, FL 32904

Phone: (321) 724-9971 ext 435 Fax: (321) 724-6131 Email: controller@studentcrew.com