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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FULAGE NEAD ALL ING IN	OCTIONO BEFORE COMPLETE	SECOLATION OF THE SECOND
REINSTATEMENT	EPARTMENT OF STATE cretary of State on of corporations	SECRETARY OF STATE DIVISION OF CORPORATIONS 04 JAN 29 AM 8:00
DOCUMENT # PO20004 1. Corporation Name KEAL Communication	15878 	CTATERNERIT (12 _)()
	ואוואו	STATEMENT <u>03-04</u>
2. Principal Office Address H4438 Suite, Apt. #, etc. 3. Mailing Office 4. H438 Suite, Apt. #, etc.	WeyMouth- 31 7/20	03 90142 007 × 150.
N/A	4. Date Incorp	porated or Qualified iness in Florida
City & State / City & State / LAKENDRIH FL LAKE U Zip Country Zip	worth FL 5. FEI Number 37 -	
33461 USA 3346		E OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status
7. Name and Address of Current Registered Agent		
Street Address (P.O. Box Number is Not Acceptable) ### 38 NEY Mouth & I Sdite, Apt. #, Etc. City Lake WORTH	-bHNSON 02/03	DDD28160267 3/0401068003 **150.00 State Zip Code FL 3346/
8. I, being appointed the registered agent of the above named proposition, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent Pate Pate Pate Pate Pate Pate Pate Pat		
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	Street Address of Each Officer and/or Director	City / State / Zip
Pres MR Kobin JOHNSON	1217 Chesi wood Blup	Lafee worth FL 33460
N/A		
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11.		
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 filling 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 all discurrate, and my signature mall have the same legal effect as if made under oath. SIGNATURE:		
ACCULATIONS AND TYPED OF PRINTED MANE OF SI	CHING OFFICED OF DIRECTOR	Date Daytime Phone #

20/2

Robin B. Johnson 1217 Crestwood Blvd Lake Worth, Fl. 33460 —14 January 2004

The American Committee of the Committee

Attn: Representative of Florida
Department of State

Re: Corporation Reinstatement

To Whom It May Concern:

I received a letter from the state in September 2003 regarding the Corporation Real Communication Inc., requesting some additional information. A reply was submitted immediately and returned prior to September 10, 2003. Soon after the company Real Communication Inc., was dissolved.

Sincerely,

Robin B. Johnson

President

01-24-04