PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2007 JUN 12 PM 1:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000046909

REINSTATEMENT 06-07
CR2E081 (1/07)

1. Corporation Name
QUALITY INTERNATIONAL ADVISORS, INC.

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
7621 CHARLESTON ST.	← SAME
Suite, Apt. #, etc. —	Suite, Apt. #, etc. —
City & State: BRADENTON, FL	City & State: ← SAME
Zip: 34201 Country: USA	Zip: ← SAME Country:

4. Date Incorporated or Qualified To Do Business in Florida: 4/28/03

5. FEI Number: 16166582 4 — Applied For

6. CERTIFICATE OF STATUS DESIRED ☑ [redacted] $75

7. Name and Address of Current Registered Agent

Name: BONNIE J. DOMSCHKE
Street Address (P.O. Box Number is Not Acceptable): 7621 CHARLESTON ST.
Suite, Apt. #, Etc.: —
City: BRADENTON, FL State: FL Zip Code: 34201

☑ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent: X Bonnie J. Domschke — REGISTERED AGENT MUST SIGN — Date: 6/8/07

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Names of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PRES	H. GUNTHER DOMSCHKE	7621 CHARLESTON ST	BRADENTON, FL 34201
V.P	BONNIE J. DOMSCHKE	7621 CHARLESTON ST	BRADENTON, FL 34201
		100104251193 06/12/07--01030--008 **450.00	

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 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 contained in Chapter 119, 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.

BONNIE J. DOMSCHKE

SIGNATURE: X Bonnie J. Domschke — 6/8/07 — 941-351-7595
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

6/12 aw