	PLEASE READ	ALL INST	FRUCTIONS	BEFORE C	OMPLET	ING THIS FOR	16A	
APPLICATION FLORID			DA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State		1 ANT 18 A STORY OF THE STORY			
	STATEMENT DAOG	IVISION OF CORPORATIONS		97 DEC 29 AM H: 53				
DOCUMENT # P10288 1. Corporation Name								
BOBENAL INVESTMENTS, INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
			dress Ke lansing road					
E. LANSING MI 48823 E. LAN			MI 48823				A BIRAN BIRIN BIRIN BIRIN BARIN ARRA	
If shove addresses are incorrect in any way, line through incorrect information and enter correction below.								
	incipal Office Address, If Applicable		New Mailing Office Address, If Applicable			4. Date Incorporated or Qualified To Do Business in Florida		
Suite, Apt.	#, etc.	Sulte, Apt. #,	Sulte, Apt. #, etc.			5 FEI Number		
City & State	θ	City & State	City & State		1 38°1/3696/ - - - - - - - - - - 		Not Applicable	
Zip	Country	Zip	Country	y		OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status	
	and Street Addresses of Each Officer and. Name of Officers	or Director (Flo	Str	et Address of Each				
Title(s)	and/or Directors 2		Officer and/or Director 3 (Do NOT Use Post Office Box N		lumbers)	4	/ State / Zip	
PD	SIMON, MARGIE		2540 EMERALD LAKE DRIVE			EAST LANSING MI 4	8823	
VD	FINE, JILL S	1311 FAIROAKS CT			EAST LANSING MI 48823			
SMD	FINE, JEROME L	1311 FAIROAKS CT			EAST LANSING MI 48823			
TD	ROCKAFELLOW, SUSAN S	2028 BECHTEL			INDIANAPOLIS IN 46260			
						TEMENT,	1997	
						B/FILE	a. dan 1	
8. Name and Address of Current Registered Agent					9. Name and Address of New Registered Agent			
ACCARDI, ROGER							(9/x1/11	
40 JASMINE DRIVE DEBARY FL 32713			Suite, Apt. #, Etc.		.O. Box Number is Not resolved to 1322 9 -01/06/9801076002 *****750.00 *****750.00			
			City			Is	tate 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.								
Signature of Registered Agent Must sign REGISTERED AGENT MUST SIGN Date 19/24/97								
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No No No (See other side for information on intangible tax.)								
12. 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 paries of individuals listed on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.								
SIGNATURE: SIGNATURE AND THE OF PRINTED NAME OF SUNING OFFICER OF DIRECTOR Dayling Prioric #								