PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.



APPLICATION PROPERTY FLORIDA DEPARTMENT OF STATE

] /"	FOR	St	andra B. Mor	tham					
REIN	ISTATEMENT	,	Secretary of S			ILED)		
DOCUMENT # P20653						96 DEC 12 AM 8:51			
Corporation Name						· ·			
CYPR	ESS FARM, INC.				TALLA	ETARY OF STA HASSEE FLOO	ATE RIDA		
Principal Place of Business Mailing Address									
220 E. FIFTH STREET -220 E. FIFTH									
LOUISVILLE GA 30434 — LOUISVILLE-					REINSTATENENT 1991				
If above	addresses are incorrect in any way, line th	rough incorrect info	mation and enter	correction below.	12/13/9	MICHIE	1296		
New Principal Office Address, If Applicable 3. New Mail			ng Office Address, If Applicable			orated or Qualified tess in Florida	08/26/1988	Pilite	
Suite, Apt. #, etc Suite, Apt. #			etc.		5. FEI Number		Applied	For	
City & Sta	le	City & State	Ity & State VERO BEACH, FL			58-1321468 Not Applicable			
Zip	Country	Zip 32963	Country		6. CERTIFICATE	OF STATUS DESIRED	\$8.75 Additional Fee	required Status	
7. Names	and Street Addresses of Each Officer and	<u></u>			ssl 3 directors)		2.		
Title(s)	Name of Officers and/or Directors 2	and/or Directors			1		City / State / Zip		
PD	NISSEN, SOENKE		3 (Do NOT Use Post Office Box Numbers) SEMPER STR. 12			2 HAMBURG 60 - GERMANY			
VD	BEUTTELL, GEORGE		1850 43RD AVE, STE. C11			VERO BEACH FL 32960			
SD	MEHNERT, VOLKER		1155 RENG-LEVESQUE BLVD. W., STE			STE 3000 MONTREAL, QUEBEC H3B 4K8			
					2000020356026 -12/20/9601108024				
						****375		20	
	8. Name and Address of Current	t Registered Agent			9. Name and A	Address of New Regi	stered Agent		
BEUTTELL, GEORGE					(P.O. Box Number is Not Acceptable)				
1850 43RD AVE., STE. C-11				Street Address (P.O. Box Number is Not Acceptable)					
VERO BEACH FL 32960			Suite, Apt. W, Etc.						
	• 4	0		City		·	State Zip Code		
10. l, b	appointed the registered agent of the	ove names (Expora	tic), am famillarwi	th and accept the o	bligations of Secti	on 607.0505, F.S.	<u> [</u>		
Signature Registered	Agent Agent	WWW C	MINIST SIGN			Date 12/9	196		
11. De	oes this corporation pay ept. of Revenue under S	any intangil . 199.032, F	ole tax to the Florida Stati	e utes. Yes	₩ No □		other side for information on intangible tax.)		
this rel owed t	y that t am an officer or director or the rece nstatement application, the reason for diss by the corporation have been paid and the application is true and accurate, and my t	solution has been el names of Individue	iminated, the corpo its listed on this for	rate name satisfies m do not qualify for	the requirements an exemption und	ol section 607.0401 d	or 617.0401, F.S., that all f	008	
	\ / / /				. 1	- /-			
SIGNA			٠		11/	15/96			
	SIGNATURE AND TYPED OR PE	RINTED NAME OF BIO	INING OFFICER OR I	DIRECTOR		Date	Daytime Phone #		