PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORMUL STATE TALLAHASSEE, FLORIDA FLORIDA DEPARTMENT OF STATE **CORPORATION** 04 JUN 15 PM 4: 47 Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS P28389 DOCUMENT # 1. Corporation Name TOW COMPANY 2. Principal Office Address 3. Mailing Office Address 03 01079 OUL SSU, W 5505 Blue Lagoon Dr 5505 Blue Lagoon DR Suite, Apt. #, etc. Suite, Apt. #, etc. To Do Business in Florida 3/06/1990 City & State City & State 5. FEI Number Applied For Miami, FL 74208637 Not Applicable Miami. Country Country \$8.75 Additional Fee required for a Certificate of Status 33126 USA 33126 USA CERTIFICATE OF STATUS DESIRED 7. Name and Address of Current Registered Agent Name 400038046444 CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 200 S. Pine Island Road Suite, Apt. #, City 33126 Plantation 8. I, being appointed the redictored agent of the above hamed corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S Signature of Registered Agent REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director Titles City / State / Zip D&P Mighael Ellis 5505 Blue Lagoon Dr. Miami, FL 33126 5505 Blue Lagoon Dr. 33126 Sheila Reinken Miami, FL D&T W. Barry Blum 5505 Blue Lagoon DR Miami, FL 33126 D&S

5505 Blue Lagoon Dt

5505 Blue Lagoon Dr

5505 Blue Lagoon DR

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 and accurate, and my signature shall have the same legal effect as if made under oath.

E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR .

Amy Knights

Elsie Romero

Lisa Wilson

VP

VP

AS

SIGNATURE:

Miami,

Miami,

Miami, FL

FL

FL

33126

33126

33126

Untitled

BKC had originally submitted the 2003 annual report with check for \$550.00 per corporation.

There was a problem with the officers list on the annual report. The filing was rejected

and a letter was sent to BKC notifying us with the issue on the officers list. The State of

Florida did not return the \$550.0 check and cashed it. BKC did not receive the letter

notifying us of the rejection and the need to correct the officers list.

I did speak with someone at the SOS office and told BKC need only submit the balance of the \$900.00 and that the \$550.00 would be applied to the reinstatement fee.

Lisa Wilson Burger King Corporation

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DIVISION OF COMPONATIONS