APPLICATION ∻⊘FÔR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT#

P38058

1. Corporation Name

HOT 'N NOW, INC.

Principal Place of Business

Mailing Address

17901 VON KARMAN

17901 VON KARMAN

FILED 00 SEP -7 AM 11: 34

SECRETARY OF STATE TALLAHASSEE FLORIDA

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irvine ca Us	VINE CA 92714 IRVINE CA 9		2714					
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					RFINS	TATEMENT	440	
New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable					4. Date Incorp	orated or cluallied		
				rlane	To Do Business in Florida 03/25/1992			
Suite, Apt. #, etc. Suite, Apt. #,					5. FEI Number	1 Trippiles of 1		
City & State Cours VIII CUUS			ville Ky]	38-2967393	Not Applicable	
Zip 40213 Country SA Zip 4021			Country			E OF STATUS DESIRED \$8,75	Additional Fee required a Certificate of Status	
7. Names and Street Addresses of Each Officer and/or Director. (Florida nonprofit corporations must list at least 3 directors)								
Title(s)	Name of Officers and/or Directors		Street Address of Each Officer and/or Director 3			City / State / Zip		
V D	-GOODMAN, RICHARD		-17901-VON-KARMAN		IRVINE CA			
					<u> </u>	163331==3)		
-VG	MOORE, GREGORY N		-17901-VON-KARMAN			-IRVINE \$13/12/00(****900.00	
→ PT	CRAIG, MAX D.		24862 BUCKBOARD LANE			Trying CA 92614		
VSD	D Preston, Matthew M.		1441 Gardiner Lane		Louisville K	y 40213		
VΡ	VP Toop, R. Scott		1441 Gardiner Lane		Conisville			
(ASST) McDonald, Linda J. 11				1441 Gardiner Lane Louis ville KY 40213				
8. Name and Address of Current Registered Agent					Name and Address of New Registered Agent			
THE PRENTICE-HALL CORPORATION SYSTEM INC.				Name CT	CT Corporation System			
1201 HAYS STREET				Street Address (P.O. Box Number is Not Ageptable) Island Rd.				
<u> </u>					Suite, Apt. #, Etc.			
TALLAMASSEE EL 32301					On The Code			
Plantation FL 3332							33324	
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 Part o								
Signature of Registered Agent Susan J. Metze; Asst. Sect. Date 9-5-00 REGISTERED AGENT MUST SIGN								
11. 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 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.								