		PLEASE READ	ALL INST	<u> </u>	ONS	BEFC	RE C	OMPLET	ING THIS FORM	1 .	
				A DEPARTMENT OF STATE Sandra B. Mortham Secretary of State			STATE		(∆1.0 € re	non ros.	
REIN	STATE	IVISION OF CORPORATIONS				Kina ()					
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If shove a	ridrassas are	e incorrect in any way, line thr	rough incorrect i	information a	nd enter	correction (below,	REINS	STATEMEN	40-41	he.
New Principal Office Address, If Applicable				ing Office Address, If Applicable BOX 8495				Date Incorp To Do Busin	porated or Qualified ness in Florida FEBRU	ARY 23, 1993	3
City & State City & State				rer F				5. FEI Number 65-039	65-0391826		····
Zip 33478 Country USA 33468-				-8495	Countr	У			E OF STATUS DESIRED .	8.75 Additional Fee require for a Certificate of Status	
7. Names a Title(s)	ames and Street Addresses of Each Officer and/or Director (Fig. (6) Name of Officers and/or Directors			orlda nonprofit corporations must list at lea Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box N			s of Each)	City / §	State / Zip	
P	P Rex M. Bell			16330 Jupiter Farm				ms Rd	Jupiter, F	1 33478	
VP	VP Fran Bell			16330 Jupiter Farm			Farı	ms Rd	Jupiter, F	1 33478	_
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	R Nar	no and Address of Current	Danielaran An					O Nome and	Address of New Registers	اممید ۵ ا	_
8. Name and Address of Current Registered Agent Rex M. Bell				<i>л</i> ц					9. Name and Address of New Registered Agent 4.00000000000000000000000000000000000		
16330 Jupiter Farms Rd Jupiter, Fl 33478						Street Address (P.O. Box Number is Not Accessed 1) 180					
					Sulte, Apt. #, Etc.						_
)	that at the al-				City		Programme Cont	Stat FI		
Signature of Registered A	ıf	ne registered agent of the abo	egistered ag			ith and acce	apt the op	Digations of Sections	Date October	6, 1997	
		corporation pay a					Yes	No	X (See other s	side for information angible tax.)	7

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 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 came legal effect as I made under oath.

SIGNATURE: Rex M. Bell SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

October 6,

1997

561-748-0986 OR 770-502-8744

Daytime Phone #