PLEASE READ	ALL INSTRUCTIO	NS BEFORE (COMPLETING THIS FORM.
	FLORIDA DEPARTI A antira B. Set etany Decision of co		
DOCUMENT # P9300027856			97 APR 30 PM 12: 24
1. Corporation Name PROFESSIONAL FOUNDATIONS OF FLORIDA, INC.			SECRETARY OF STATE TALLAHASSEE FLORIDA
Principal Place of Business 4311 NW 19 AVE. BOMPAND BERCH, FL. 33064	NW 19 AVE. H311 NW 19 AVE. PAND BEACH, FL. POMPAND BEACH, FL. 32064		
2. New Principal Office Address, II Applicable	3. New Mailing Office Address, If Applicable		 Date Incorporated or Qualified To Do Business in Florida
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. FEI Number Applied For
City & State	City & Stato		65-0396509 Not Applicable
Zip Country	Ζιρ C	country	6. CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee required for a Certificate of Status
ТНИ(S) 2 RES. CHARLESLFLENN YP JOHN J. AHEN TREAS MAKK F. AHE SEC. JOHN T. AHEN	4436 1KEN ROYAL EN 2152 ERN 2871 M.	Street Address of Each Diffeer and/or Director I Use Post Office Box DALM- BCAC I E. Holly, N. OCEAR -12-6 NW 484	Numbers) 4 N. 33411 City/State/Zip A. 33411 City/State/Zip 33411 City/State/Zip 33411 City/State/Zip 33411 City/State/Zip A. 33411 City/State/Zip A. A. A
B. Name and Address of Current Registered Agent S. Name and Address of New Registered Agent Name			
JERRY WOLDSZE 1252 RAINTREE WELLINGTON, FL.	CANE 33414	4311 Suite Apt. #, Etc Pomp	AND BEACH, FL. State Zip Code FL 33064
10. I, being appointed the recidered generative named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent			
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes 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 reinstationent 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 foes owed by the proporation 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. SIGNATURE: HARLIES L. FLE NUMFER 1/28/97 /954-964-8360 Branature and typed on PRINTED NAME OF SIGNING OFFICER ON DIRECTOR			

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March 28, 1977

To: Florida Department of State Re: Reinstatement of Professional Foundations of Florida, Inc.

Professional Foundations of Fla., Inc. was incorporated on April 14, 1993 in the state of Florida.. At the time Jerry Woloszczuk was the accountant and registered agent for the corporation and received all paperwork for such. In 1995 we changed accountants and failed to file corporate papers for Professional Foundations because we were not aware that we had to do so. Jerry Woloszczuk must have received our annual reports for 1995 & 1996. We sincerely did not know that the reports needed to be filed.

We apologize for our ignorance and would appreciate any financial break that you could give us in our reinstatement fee. Enclosed please find a check for \$ 565.00 per your office.

Respectfully

Charles Flenniken, Pres.