PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
00 DEC 21 PM 1:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 93000056133

REINSTATEMENT 2000

1. Corporation Name
Bridy Enterprises, Inc.

2. Principal Office Address
2407 N.W. 135 Street
Suite, Apt. #, etc.
Suite 101
City & State
Miami, Florida
Zip 33167 Country U.S.A.

3. Mailing Office Address
2407 N.W. 135 Street
Suite, Apt. #, etc.
Suite 101
City & State
Miami, Florida
Zip 33167 Country U.S.A.

4. Date Incorporated or Qualified To Do Business In Florida 07/19/1993

5. FEI Number 65-0427741 Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED X $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

200003515222--0
-12/28/00--01016--009
****758.75 ****758.75

Name
Edward A. Bridy
Street Address (P.O. Box Number is Not Acceptable)
2407 N.W. 135 Street
Suite, Apt. #, Etc.
Suite 101
City
Miami
State FL Zip Code 33167

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent E. Bridy REGISTERED AGENT MUST SIGN
Date December 20, 2000

CR2E081 (9/98)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD Pres. + Dirct.	Edward A. Bridy	2407 N.W. 135 Street Suite 101	Miami, Florida 33167
			LS

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 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.

SIGNATURE: E. Bridy Pres. Edward A. Bridy, President December 20, 2000 (305) 769-0146
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #