

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. M...
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 993000061693

1. Corporation Name
Robally inc

FILED
97 DEC 22 11 05 AM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
1446 WASHINGTON Ave
MIAMI Beach FL 33139

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc. City & State Zip Country

4. Date Incorporated or Qualified To Do Business in Florida 8/26/93
5. FFI Number 65-0442671 Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED [] \$8.75 Additional Fee required for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
Pres	MONTENEGRO, Robert	6891 SW 72 ST	MIAMI FL 33143

300002383383--0
-12/26/97--01070--012
****765.00 ****765.00

8. Name and Address of Current Registered Agent

~~6891 SW 72 ST
MIAMI FL 33143~~
BeFeler, George
150 W FLAGLER ST
MIAMI FL 33130

9. Name and Address of New Registered Agent

Name ROBERT MONTENEGRO
Street Address (P.O. Box Number is Not Acceptable) 6891 SW 72 ST
Suite, Apt. #, Etc.
City MIAMI
State FL Zip Code 33143

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 Registered Agent Robert Montenegro
REGISTERED AGENT MUST SIGN

Date 12/16/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes [X] 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 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: Robert Montenegro
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROBERT MONTENEGRO Pres

Date 12/16/97
Daytime Phone # (305) 674-7854

CP2EN01299

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ROBALLY, INC.
1446 WASHINGTON AVENUE
MIAMI BEACH, FLORIDA 33139

December 17, 1997

Department of State
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

Dear Department of State:

I respectfully request reinstatement of my Florida Corporation; Robally, Inc., as of today. Enclosed is my completed Application For Reinstatement form, plus my check for \$765.00 payable to the Department of State, which I computed at \$200.00 for each of the years 1994, 1995, 1996, and \$165.00 for 1997. I request abatement of any and all additions to the regular yearly fee, due to the following reasonable cause.

Unfortunately, in 1994, I was the victim of a horrible marital dissolution, that shook my world upside down. I believe that my former spouse probably discarded many of my legal and business documents, which included the annual report for the State of Florida. I have never seen, received or had any knowledge of your annual report. In addition, according to your records, I was not the registered agent.

As of today, I am taking control of this situation and naming myself as the registered agent, to prevent a reoccurrence of this situation.

Please reinstate my corporation without penalty.

Very truly yours,



Robert Montenegro, President
Robally, Inc.