


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

<b>APPLICATION FOR REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <b>AND FILED</b> </div>  98 JUL 10 AM 10:41  SECRETARY OF STATE TALLAHASSEE, FLORIDA	
<b>DOCUMENT # P93000077004</b> 1. Corporation Name <b>THE ADVANCED GROUP, INC.</b>		<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">REINSTATEMENT</div> <div style="font-size: 1.5em; font-weight: bold;">05-98</div>			
Principal Place of Business <b>1030 TREASURE LANE</b> <b>VERO BEACH, FL 32963</b>					
Mailing Address <b>SAME</b>					
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable  Suite, Apt. #, etc.  City & State  Zip      Country		3. New Mailing Address, If Applicable  Suite, Apt. #, etc.  City & State  Zip      Country		4. Date Incorporated or Qualified To Do Business in Florida <b>11/28/93</b>  5. FEI Number <b>65-0462799</b>  6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> <b>\$8.75 Additional Fee required for a Certificate of Status</b>	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
1	2	3	4		
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip		
DP	McMURRAY, ROGER L.	6937 SW 83RD CRT.	MIAMI, FL 33143		
VP	WHITEHOUSE, CAROL	1030 TREASURE LANE	VERO BCH, FL 32963		
ST	PATEL, JITENDRA	7300 SW 10TH ST.	PLANTATION, FL 33317		
			<b>500002587495--4</b> <b>-07/14/98-01008--009</b> <b>***1200.00***1200.00</b> <b>7-10-98</b>		
8. Name and Address of Current Registered Agent			9. Name and Address of New Registered Agent		
McMURRAY, ROGER L. 6937 SW 83RD COURT MIAMI, FL 33143.			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			Suite, Apt. #, Etc.		
			City      State      Zip Code		
			<div style="border: 1px solid black; padding: 2px; display: inline-block;">FL</div>		
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 <b>Roger L. McMurray</b> Date <b>7-8-98</b> <div style="text-align: center; font-size: 0.7em;">REGISTERED AGENT MUST SIGN</div>					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes.    Yes <input type="checkbox"/> No <input type="checkbox"/> (See other side for information on intangible tax)					
12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: <b>Roger L. McMurray</b> <b>ROGER McMURRAY 7-8-98 (561)231-5522</b>					

CR2000 (12/95)