

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT 		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED 00 APR 10 PM 12: 15 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # 93600001244 1. Corporation Name Clinton Equipment Corp.				REINSTATEMENT	
Principal Place of Business 5800 Miami Lake Dr. Miami Lake, FL 33014		Mailing Address 5800 Miami Lake Dr. Miami Lake, FL 33014			
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 11/19/1993 5. FEI Number 65-0457040 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> <small>\$9.75 additional fee required for a certificate of status</small>					
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 Directors)					
1	2	3	4	5	6
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		
Director	John K. Ziegler	43 Huron Drive	Chatham, NJ 07928		
Director	John K. Ziegler, Jr.	72 Riverside Drive	Basking Ridge NJ 07920		
Director	Maxwell L. Tripp	3935 Ashley Trace Court	Lilburn, GA 30247		
Director	Mary-Anne Kieran	22 First Street	Yonkers, NY 10704		
400003213584-6 04/18/00 01117-006 ***1208.75 ***1208.75					
8. Name and Address of Current Registered Agent Arthur J. Green - 1801 University Drive Coral Springs, FL 33071			9. Name and Address of New Registered Agent Name CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road Suite, Apt. #, Etc. City Plantation State FL Zip Code 33324		
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 <u>Jennifer Leigh Margia-Specialist</u> Date <u>4/7/00</u> <small>REGISTERED AGENT MUST SIGN</small>					
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: <u>John K. Ziegler, Jr.</u> <small>SIGNATURE AND TYPED OR PRINTED NAME SIGNING OFFICER OR DIRECTOR</small>			Date <u>4/6/2000</u> Daytime Phone # <u>(732) 541-6255</u>		