PLEASE READ APPLICATION FOR REINSTATEMENT	ALL INSTRUCTIONS FLORIDA DEPARTMEI Sandra B. Moi Secretary of S DIVISION OF CORPO	NT-OF STATE tham State	OMPLETING THIS FA 97 NO	SMANROYEU AND FILED V-7 PM 1:50
DOCUMENT # P9400002825			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
1. Corporation Name R & M ENTERPRISES USA, INC.	C.	į		STATE OF THE STATE
Incipal Place of Business 45 INTERNATIONAL DRIVE 115 #115 RLANDO FL 32819 S US I above addresses are Incorrect in any way, line through Incorrect information and enter or				7)
New Principal Office Address, If Applicable New Mailing Office Address, If Applicable Suite, Apt. #, etc. Suite, Apt. #, etc.		Applicable	Date Incorporated or Qualified To Do Business In Florida	01/12/1994
City & State City & State			5. FEI Number 59-3219023	Applied For Not Applicable
Zip Country	Zip Countr	y	6. CERTIFICATE OF STATUS DESIRED	\$8.75 Additional Fee required
7. Names and Street Addresses of Each Officer and/or Title(s) 2 Name of Officers and/or Directors P BENODIN, ROBERT	3 (DO NOT V) 11818 CROCKET	eet Address of Each licer and/or Director so Post Office Box No	ORLANDO FL 32	45030-7 7-01093-009 1.00 ****750.00
THE LAW FIRM OF LAWRENCE J. SPIEGEL CHRTRD 343 ALMERIA AVENUE CORAL GABLES FL 33134 Suite, Api. City ORC. 10. 1, being appointed the registered agent of the above named corporation, am familiar with and accept Registered Agent		Street Address (P. 118 18 (C. Sulte, Apr. #, Etc. BALANS) City ORLANS	SERT BENOSIM (P.O. Box Number is Not Acceptable) CROCK GTT COVAT IC. (#) O (1) O State Zip Code FL 32824	
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. 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 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 logal effect as if made under oath. **ROBERT BIENOVIN** **ROBERT BIENOVIN** **ROBERT BIENOVIN** ***ROBERT BIE				
SIGNATURE: 10-2>-97 (407)352-9375				