PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FLORIDA DEPARTMENT OF STATE

Katherine Harris

APPLICATION

FOR

FOR REINSTATEMENT	Sec	retary of State	FILED	
DOCUMENT # P9400003041 1. Corporation Name CHRISTIAN L. INTERNATIONAL, INC.			01 NOV -2 AM 9: 05	
			SECRETARY OF STATE TAELAHASSEE, FLORIDA	
Principal Place of Business	Mailing Address			
13499 BISCAYNE BLVD SUITE 206 N MIAMI FL 33181 US If above addresses are incorrect in any way, line to	13499 BISCAYNE BL' SUITE 206 N MIAMI FL 33181 US		INSTATEMENT 700	
New Principal Office Address, If Applicable	0	ice Address, If Applicable	4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		01/12/1994 5. FEI Number Applied For	
City & State	City & State		NOT APPLICABLE Not Applicable	
Zip Country	-Zip	Gountry	CERTIFICATE OF STATUS DESIRED \$8.75 - Additional Fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer an	d/or Director (Florida no	onprofit corporations must list at lea	ast 3 directors)	
Title(s) Name of Officers and/or Directors	3	Street Address of Each Officer and/or Director		
D LEUZZI, NOREEN	335 (POINCIANA ISLAND DR	N MIAMI BEACH FL 33154	
			6000047046168 -12/04/0101067026 ****750.00 ****750.00	
8. Name and Address of Current Registered Agent Name		Name and Address of New Registered Agent		
LEUZZI, NOREEN 335 POINCIANA ISLAND DR N MIAMI BEACH FL 33154			P.O. Box Number is Not Acceptable)	
10. I, being appointed the registered agent of the all Signature of Registered Agent	y hung		FL	
this reinstatement application, the reason for dis	solution has been elimin names of individuals lis	nated, the corporate name satisfies sted on this form do not qualify for	provided for in chapter 607 or 617, F.S. I further certify that when filling the requirements of section 607.0401 or 617.0401, F.S., that all fees an exemption under section 119.07(3)(i), F.S. The information indicated roath.	