PLEASE READ	ALL INSTRUCTIONS	BEFORE CON	MPLETI: Prom 1 Prom 5 Prom	
APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		98 JUN 29 PM 12: 105	
DOCUMENT # 194000004162			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
M+M International Realty, Inc.				
Principal Place of Business One Bis cayne Tower-Suite 3580 TWO South BISCAYNE BIVA. Miami, FL. 33131		same		
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 Address, If Applicable		able 4.	Date Incorporated or Qualified	
Two South Biscayne Biva - Sulle, Apl. 11, etc.	Suite, Apt. #, etc.		To Do Business in Florida 5/6/93 FEI Number Y Applied For	
City & State	City & State		X Applied For Not Applicable	
Miami, FL zip 33131 Country USA	Zip Count	ry 6.	CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/	St	reet Address of Each		
Title(s) and/or Directors	3 (Do NOT Use Post Office Box Nur TWO SOUTH BISCAY			
P/D Ronald A. Marini Suite 3580 Miami, FL. 33131				
	REI	NSTATEN	AENT 09619-3568-006	
8. Name and Artifrage of Current D	Indistruct Agent	9 N	Name and Address of New Registered Agent	
RONGIA A MAVINI				
TWO South Biscayne Bird		Name Street Address (P.O. Box Number is Not Acceptable)		
Suite 3580		Suite, Apt. #, Etc.		
Miami, FL - 33/3/		City State Zip Code		
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 Resistered Agent Must SIGN Date JUNE 3, 1998				
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No See other side for Information on Intangible tax.)				
12. I do hereby certify that the information supplied with this filing is voluntarily terrished 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 filling 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 less owed by the corporation have been pajer. 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: SIGNATURE AND TYPED OR FRINTED HAME OF GROWING DEFICER OR DIRECTOR DATE DATE DESCRIPTION DE LA CONTROLLA DE				