PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Sandra B. Mortham **FOR** Entre Const Secretary of State REINSTATEMENT **DIVISION OF CORPORATIONS** 97 APR -7 AM 7:50 DOCUMENT # P94000027058 1. Corporation Name SECRETARY OF STATE TALLAHASSEE FLORIDA T.K. - O. SERVICES, INC. Principal Place of Business Malling Address 4305 STIRLING RD 3631 W. COMMERCIAL BLVD. FT. LAUDERDALE FL 33309 #23 REINSTATEMENT 20 96-97 FT. LAUDERDALE FL 33314 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Aridress, If Applicable 7571 PIERCE STREET Suite, Apt. #, etc. 3. New Mailing Office Address, If Applicable 75.71 PIERCE STREAS Suite, Apt. **, etc. Date Incorporated or Qualified To Do Business in Florida 04/08/1994 5. FEI Number Applied For 65-0489981 City & State City & State HOLLYWOOD Not Applicable HOLLY WOOD \$8.75 Additional Fee required for a Certificate of Status Country CERTIFICATE OF STATUS DESIRED BROWARD BROWARD 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Title(s) City / State / Zip 4305 STIRLING RD #23 FT. LAUDERDALE FL 0 KEPHART, TERRY 7571 PIERCE STREET HOLLYWOOD, FL. 33024 100002137081--1 -04708/97--01140--017 *****915.00 *****915.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent KEPHART, TERRY Street Address (P.O. Box Number is Not Acceptable) 75 71 PIERCE STREET Sulte, Apt. #, Etc. 4305 STIRLING ROAD #23 FT. LAUDERDALE FL 33314 Zip Code 33024 State

HOLLY WOOD and accept the obligations of Section 607.0505, F.S. 10. I, being appointed the register of agent of the above named co-poration, Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date 4/1/97

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes.

Yes L

(See other side for information on intangible tax.)

12.) pertify 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 legal effect as if made under oath.

SIGNATURE:

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SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/97 954-894-929/
Date Daytime Phone #