

1,028.12

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 SEP 22 PM 2:24

DOCUMENT # P94000037461

1. Corporation Name
A & M INVESTING GROUP, INC.

Principal Place of Business Mailing Address
330 SW 27th Ave. #605 7820 SW 117th St.
MIAMI, FL. 33135 MIAMI, FL. 33156

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable 330 SW 27th Ave. Suite, Apt. #, etc. 605	3. New Mailing Office Address, If Applicable 7820 SW 117th St. Suite, Apt. #, etc.	4. Date Incorporated or Qualified To Do Business in Florida 5/18/94
City & State MIAMI, FL. 33135	City & State MIAMI, FL.	5. FEI Number 65-0491240
Zip 33135	Country USA	6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status

REINSTATEMENT 99-99

7. Name and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
PRES.	GARCES, NORA	7820 SW 117th St., MIAMI, FL.	MIAMI, FL. 33156

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-09/24/99--01075--012
***1058.75 ***1058.75
9/17/99

8. Name and Address of Current Registered Agent

GARCES, NORA
7820 SW 117th St.
MIAMI, FL. 33156

9. Name and Address of New Registered Agent

Name GARCES, NORA
Street Address (P.O. Box Number is Not Acceptable) 7820 SW 117th St.
Suite, Apt. #, Etc.
City MIAMI State FL Zip Code 33156

10. I, the undersigned, 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: + Nora Helena Garcia M.
REGISTERED AGENT MUST SIGN

Date: + 9/17/99.

11. This corporation owes 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 legal effect as if made under oath.

SIGNATURE: + Nora Helena Garcia M.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: + 9/17/99.
Daytime Phone #

CR20081 (12/98)