APPLICATION FOR 97-98 **REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

98 APR 18 AM 10: 54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000075092

Corporation Name

Miami Tan & Spa, Inc.

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****908.75  ****908.75
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Principal Place of Business | Mailing Address

143 S.W. 6th St.
Pompano Beach, FL 33060

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

New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable	4. Date Incorporated or Qualified To Do Business in Florida **10/10/1994**
143 S.W. 6th St.	**1650 N. Federal Hwy**	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. FEI Number **65-0536112** — Applied For / Not Applicable
City & State **Pompano Beach, FL**	City & State **Pompano Beach, FL**	6.
Zip **33060** Country	Zip **33062** Country	CERTIFICATE OF STATUS DESIRED [X]

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

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	Mark Parillo	1650 N. Federal Hwy	Pompano Beach, FL 33062
		REINSTATEMENT 97-98	
			4/18/98

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
Roberto Salvetti 143 SW 6 Street Pompano Beach, FL 33060	Name **Florida Incorporators, Inc.** Street Address (P.O. Box Number is Not Acceptable) **1221 Brickell Ave. Ste. 900** Suite, Apt. #, Etc.
(signature) Mark H— Mark Hawkins *President*	City **Miami**	State **FL**	Zip Code **33131**

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 *SIGNATURE REQUIRED* *(signature)* President Date **4/16/98**
REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes [ ] No [X]

(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: *Mark Parillo* Mark Parillo, President **SIGNATURE REQUIRED** 4/16/98 (954) 497-0391

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #