CROSS REF	DISTRIBUTION SAMAS CODE	REASON	TRUOMA
12	45-20-2-130001-45300000-00-000100-00	4	8.75
12	45-20-2-130001-45300000-00-000100-00	1	35.00
12	45-20-2-130001-45300000-00-000100-00	4	50.00
12	45-20-2-130001-45300000-00-000100-00	4	70.00
12	45-20-2-130001-45300000-00-000100-00	4	70.00
12	45-20-2-130001-45300000-00-000100-00	2	191.25
12	45-20-2-130001-45300000-00-000100-00	1,	225.00
12	45-20-2-130001-45300000-00-000100-00	2	225.00
12	45-20-2-130001-45300000-00-000100-00	2	236.25
12	45-20-2-130001-45300000-00-000100-00	4	375.00
12	45-20-2-130001-45300000-00-000100-00	1	375.00
12	45-20-2-130001-45300000-00-000100-00	4	375.00
12	45-20-2-130001-45300000-00-000100-00	1	375.00
	45-20-2-130001-45300000-00-000100-00	3	375.00
12		i	383.75
12	45-20-2-130001-45300000-00-000100-00	4	575.00
12	45-20-2-130001-45300000-00-000100-00	_	
12	45-20-2-130001-45300000-00-000100-00	1	583.75

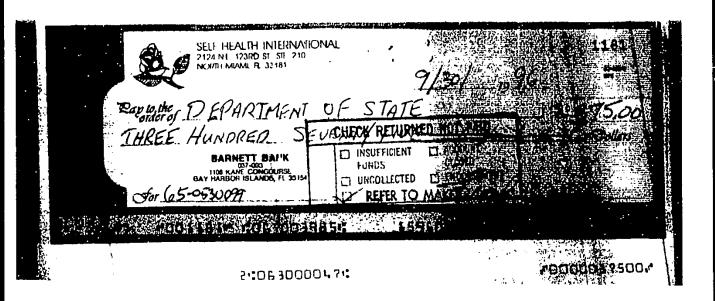
GRAND TOTAL:

\$ 4,528.75

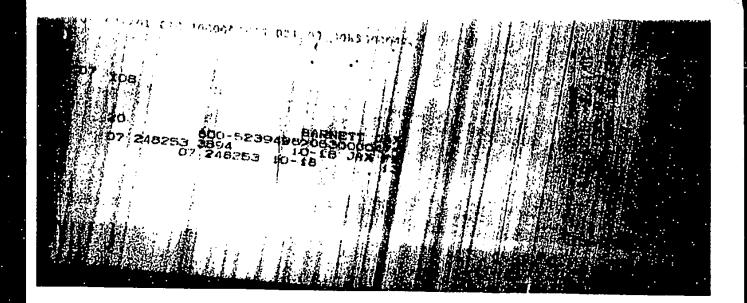
71538-

Process Date: 10/22/96

The above named fund(s) has been reduced by the amount of this check(s) under authority of Section 215.34, F.S.



7.1538 L





FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

April 10, 1997

Self Health International 2124 NE 123rd St. Suite 210 N. Miami, FL 33181

SUBJECT: ROSEMARY'S EUROPE 8, INC.

Ref. Number: P94000077464

Debit Memo #: 71538-L

This is to inform you that your check #1181 dated September 30, 1996 in the amount of \$375.00 and submitted for ROSEMARY'S EUROPE 8, INC. has been returned to us by your bank because of Refer to Maker.

We request that you remit a cashier's check or money order in amount of \$393.75 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Letter number: 697A00018135

Division of Corporations Attn: Melinda Lilliston P.O. Box 6327 Tallahassee, FL 32314

If you have any questions concerning the returned check, please call (904) 487-6900.

Sincerely, Melinda Lilliston Administrative Assistant I Division of Corporations

cc:Rosemary's Europe 8, Inc. 2124 NE 123rd St. #210 N. Miami, Fl. 33181



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

May 22, 1997

Self Health International 21224 NE 123rd St. **Suie 210** N. Miami, FL 33181

SUBJECT: ROSEMARY'S EUROPE 8, INC.

Ref. Number: P94000077464

Debit Memo #: 71538-L

Due to your failure to respond to our previous letter advising you of the returned check #1181, the Reinstatement for ROSEMARY'S EUROPE 8, INC. has been cancelled and is considered not filed as of May 22, 1997.

The status of your corporation has now reverted to its previous status of administratively dissolved or revoked.

If you have any questions concerning the returned check, please call (904) 487-6900.

Sincerely Melinda Lilliston Administrative Assistant 1 **Division of Corporations**

Letter number: 797A00028044

cc:Rosemary's Europe 8,lnc. 2124 NE 123rd St., #210 N. Miami, Fl. 33181