PLEASE READ	ALL INSTRUCTIONS	BEFORE COM	MPLETING THIS FORM.	
APPLICATION FOR ACINSTATEMENT	FLORIDA DEPARTME Sandra B. Moi Secretary of S DIVISION OF CORPO	tham A	7 > FILED	V
DOCUMENT # P94000088772 (6)			97 MAR -3 AN 8: 33,	• # #
BUY MAIL, INC.			CALLARASSEE, FLORIDA	
Principal Place of Business 7395 N.W. 35 ST. Miami, Florida 33122 Same				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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			DO NOT WRITE IN THIS SPACE 4. Date incorporated or Qualified	
Suite, Apt. #, etc. Sulte, Apt. #, etc.		To Do Business in Florida 12-06-94		
City & State	City & State	5/1	FEI Number 65-0540827	Applied For Not Applicable
Žip Country .	Zip Countr	ν <u>6.</u>	S8 75 Acid	bunal Fee required lificate of Status
7. Names and Street Addresses of Each Officer and/	I I I I I I I I I I I I I I I I I I I	itions must list at least 3 di	irectors)	
Title(s) and/or Directors Offi		eet Address of Each licer and/or Director se Post Office Box Numbe	City P State / Zip	
D-P TRIVELAS, GEORGE	SA. 7395 N.	.W. 35 ST.	Miami, Florida	33122
800002105369- -03/05/9701103011 ****385.00 ****385.1				
8. Name and Address of Current F	Registered Agent	9. N	Isme and Address of New Registered Agent	į
TRIVELAS, GEORGES A. 7395 N.W. 35 St. Miami, Florida 33122		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. 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 Pagent Agent MUST SIGN Date 0 2 - 28 - 9 7				
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 tex.)				
12. I do hereby certify that the information supplied with this filing is voluntarily furnished 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 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., and that all fees owed by the corporation have been paid. 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: GEORGES A. TRIVELAS M., D2-28-97 305-718-9210 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DO				



BUY MAIL, Inc 7395 nw. 35th STREET - MIAMI TEL:(305)718-9210 FAX(305)718-9230

February 27, 1997

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

REF: BUY MAIL, INC.
DOCUMENT # 94000088772

Please see enclosed our check for the amount of \$ 385.00 to cover the annual renewal fee for 1997 and the reinstatement for the 1996.

I kindly ask you to please waived the penalty of \$500.00 The reason I did not renew the corporation last year was because I moved, and as a matter of fact I did changed - the address at the US POST OFFICE, but unfortunately I - never received the application for the year '96.

I do appreciated very much your prompt help to this matter.

Georges A. Trivelas

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