

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM!!

**APPLICATION
FOR
REINSTATEMENT**



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

AND
FILED

97 NOV 10 PM 12:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000022126

1. Corporation Name

ALL CITY REALTY & INVESTMENTS, INC.

Principal Place of Business

**3848 W BROWARD BLVD
PLANTATION FL 33312**

Mailing Address

**575 NW 46TH TERR.
PLANTATION FL 33317**



REINSTATEMENT 97

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 Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 03/17/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 65-0424774	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

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

1 Title(s)	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
P	BROWN, KINGSLY A	3848 W BROWARD BLVD	PLANTATION FL 33317

100002344371--2
-11/12/97--01089--011
******750.00 ****750.00**

11/10

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
BROWN, KINGSLY A		Name	
3848 W BROWARD BLVD		Street Address (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33312		Suite, Apt. #, Etc.	
		City	State Zip Code
		FL	

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 <i>Kingsly A. Brown</i>	REGISTERED AGENT MUST SIGN	Date 10/29/97
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11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	(See other side for information on intangible tax.)
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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: <i>Kingsly A. Brown</i>	- Kingsly A. Brown	Date 10/29/97	Daytime Phone # (954) 791-6292
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CPRE040 (8/97)