	PLEASE READ	ALL INST	FRUCTIONS	BEFORE C	OMPLET	ING THIS FOR		
APPLICATION FOR PEINSTATEMENT			DA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		7			
DOCUMENT # P95000029235					98 DEC 18 PM 6: 42			
1. Corporation Name					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
MKA INTERNATIONAL, INC.					TALLAHASSEE, FLORIDA			
Principal Place of Business Mailing Add			ress		-			
	23RD COURT HINGS FL 33065		9761 N.W. 23RD COURT CORAL SPRINGS FL 33065					
If above a	addresses are incorrect in any way, line th	rough incorrect i	nformation and enter	REINST	. EM	ENT	98,00	
2			3. New Mailing Office Address, If Applicable		Date Incorp To Do Busir	orated or Qualified ness in Florida	04/10/1995	
Suite, Apt.			Suite, Apt. #, etc.		5. FEI Number		Applied For	
City & State City &					6.	65-0569194	Not Applicable	
Zip	Country	Zip	Countr	y 	CERTIFICATI	OF STATUS DESIRED	for a Certificate of Status	
7. Names	and Street Addresses of Each Officer and Name of Officers	/or Director (Fig	Str	eet Address of Each		1		
Title(s) and/or Directors 2			Officer and/or Director 3 (Do NOT Use Post Office Box No		ımbers)	City	y / State / Zip	
D	D DAUGHERTY, LISA 97			COURT		CORAL SPRINGS FI	<u>-</u>	
					3000027224739. -12/24/9801088025 *****758.00 *****750.90			
					20) 9000272	02472	
						-12/24/98 *****8.		
8. Name and Address of Current Registered Agent Name					Name and Address of New Registered Agent			
DAUGHERTY USA					Street Address (P.O. Box Number is Not Acceptable)			
9761 N.W. 23RD COURT CORAL SPRINGS FL 33065 Suite, Apt. #					tc.			
				City State Zip Code				
10. I, being	appointed the registered agent of the abo	nagred corpo	oration, am familiar wi	th and accept the ob	ligations of Section		<u>FL </u>	
Signature o Registered	Agent LISA Day	LEE		<u> </u>	<u>.</u>	Date		
	is corporation owes or hangible Personal Proper			ar Yes 🗌	No 🗆		er side for information intangible tax.)	
this rein: owed by	that I am an officer or director or the rece statement application, the reason for diss the corporation have been paid and the pplication is true and accurate, and my si	olution has been names of individ	eliminated, the corpo uals listed on this for	rate name satisfies t n do not qualify for a	the requirements an exemption und	of section 607.0401 or 6	17.0401, F.S., that all fees	

Daytime Phone #

SIGNATURE: