PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Sandra B. Mortham FOR Secretary of State FILED REINSTATEMENT DIVISION OF CORPORATIONS 96 SEP 23 PH 1: 15 P95000043770 **DOCUMENT #** SECRETARY OF STATE TALLAHASSEE, FLORIDA Corporation Name CYNERGY DEVELOPMENT CORPORATION Malling Address Principal Place of Business 929 16TH ST 929 16TH ST MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 If above addresses are incorrect in any way, line through incorrect information and enter correction below. Date Incorporated or Qualified
 To Do Business in Florida 3. New Mailing Office Address, if Applicable 2. New Principal Office Address, If Applicable 06/07/1995 Suite, Apt. #, etc. Applied For Suite, Apt. #, etc. 5. FEI Number Not Applicable City & State City & State \$8.75 Additional Lee required CERTIFICATE OF STATUS DESIRED for a Certificate of Status Country Zin Country Zip 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Name of Officers and/or Directors Oity / State / Zip Title(s) Miami Beach FC 33139 Cynthia Nallee President 700001970727 -10/10/96--01058--017 - ****208.75 ****208.75 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) NALLEY, CYNTHIA 929 16TH ST Suite, Apt. #, Etc. MIAMI BEACH FL 33139 Zip Code State 10. 1, 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 REGISTERED AGENT MUST SIGN (See other side for information 11. Does this corporation pay any intangible tax to the on intangible tax.) Dept. of Revenue under S. 199.032, Florida Statutes. No (2 Yes 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 filling 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. 9/18/96 (305)672-044

SIGNATURE:



CYNERGY

September 18, 1996

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sir/Madam:

Enclosed please find a check number 1051 to the Department of State for annual corporation feet. This is my third attempt to pay these feet. My first check was returned to me with a letter stating from one of your databases is unbelievable in this information age. Wouldn't it have been easier to cash the check and call my office to ask me the number? The form DID NOT state that it was mandatory on the front.

Apparently, since I received a notice of disillusion from you, you never received the corrected application. Now I see the wisdom in paying an EXTRA \$8.75 to see that you process your

I am disputing the \$175 reinstatement fee I believe I have performed in good faith to pay you this money, indeed you had the check in your possession. I do not see why I should now pay \$175 because I elected not to pay \$8.75 to ensure you received the second check.

Additionally, the phone system at your office does not allow the caller to hold in a queue. When the lines are busy, you have to call again and again and be answered with a busy cone. Have you mail?

Please consider these constructive suggestions and contact me regarding my legal options with regard to this \$175 penalty.

Sincerely,

Cynthia Nalley

Principal