PLEASE READ	ALL INSTRUCTIONS	S BEFORE C	OMPLETIN	G THIS FOI	RM.	
APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTME Sandra B., Mc Secretary of DIVISION OF CORPO	ortham State		FILES)	engle cia Observa
DOCUMENT # P95000047470 1. Corporation Name			× ; 0	FEB INOP	\	
PROSPER AMERICA, INC.			TĀ	LLAHASSEE,	- STATE FL o rida	
Principal Place of Business Mailing Address			 	010: 01111 0541 0614 <u>06</u> 111	 	1811 J 88 1
3741 N.E. 163 ST., SUITE 271 NORTH MIAMI BEACH FL 33160 3741 N.E. 163 ST., SUITE 271 400 RITH MIAMI BEACH FL 33160 3/28 LAMP(445)7.72						
If above addresses are incorrect in any way, line th 2. New Principal Office Address, If Applicable		information and enter correction below. ulling Office Address, If Applicable		ted or Qualified s in Florida	06/19/1995	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. FEI Number	111	Applied	d For
City & State	City & State		<u>ES 05 8</u>	1997		plicable
Zip Country	Zip Cour		<u> </u>	STATUS DESIRED	\$8.75 Additional Fed for a Certificate of	Status
7. Names and Street Addresses of Each Officer and Name of Officers and/or Directors	S	orations must list at lea Street Address of Each Officer and/or Director			ih. (State) Tin	
PSTD BERNARD, PROSPER M	3 (Do NOT	Use Post Office Box N	NORTH MIAM BEACH FL 3			
	3128	LAMPLIE	ghter ;	SARAS	PL34	2 34
		REIN	ISTATE	MENT	6 214	97
8. Name and Address of Current Registered Agent Name			9. Name and Add	ress of New Regist	iered Agent	96/2
THE LAW FIRM OF LAWRENCE J SPIEG 343 ALMERIA AVENUE CORAL GABLES FL 33134	EL CHRTD	Street Address (P.O. Suite, Apt. #, Etc.		-02/19/97	9 0 049	-5 §
	•	City		****375.	.00 ****375. State Zip Code FL	,00
10. I, being appointed the registered agent of the at Signature of Registered Agent 11. Does this corporation pay Dept. of Revenue under S.	EGISTERED AGENT MUST SIGN		oligations of Section	Date	her side for information	
,12. I certify that I am an officer or director or the rece this reinstatement application, the reason for diss owed by the corporation have been paid and the on this application is true and accurate, and my s	oiver or trustee empowered to execu colution has been eliminated, the cor names of individuals listed on this f	te this application as p porate name satisfies orm do not qualify for offect as if made under	the requirements of an exemption under	or 607 or 617, F.S. I f	617.0401, F.S., that all	lees