				·				
APPLICATION FOR AREINS EXTENSION		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			FILED			
DOCUMENT # P95000070517						97 FEB -5 AM 9: 58		
1. Corporation Name INTERNATIONAL CIGAR CLUB, INC.						SECRETATION STATE TALLAMASSEE, FLORIDA		
	WATIONAL C	NGAR CLOB	i 1140.		•		TALLAHASSE	É, FLORIDA
Principal Place of Business ** JEFFREY M. PERLOW 1820 E. HALLANDALE BEACH BLVD. HALLANDALE FL \$3009			Mailing Address % JEFFREY M. PERLOW 1820 E. HALLANDALE BEACH BLVD. HALLANDALE FL 33009					
If above addresses are incorrect in any way, line thro 2. New Principal Office Address, if Applicable			ugh incorrect information and enter correction below. 3. New Maifing Office Address, If Applicable				prated or Qualified	00/40/4005
Suite, Apt. #, etc.			Suite, Apt. #, etc.			To Do Busin 5. FEI Number	ess in Florida	09/13/1995
City & State			City & State			65-0638284 Not Applicable		
Zip	Coun	try	Zip	Countr	у	6. CERTIFICATE	OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status
7. Names a		of Each Officer and/o	or Director (Flor		ations must list at lea			
Title(s) and/or Directors 2			Officer 3 (Do NOT Use P		flicer and/or Director se Post Office Box N	lumbers)	4	City / State / Zip
PD, SHPRECHER, MISHA			1820 E. HALLANDALE BEACH			LVD. HALLANDALE FL 33009		
·				2000020801625			001625	
			-02/06/9701052010					
	 						<u> </u>	0.00 ****360.00
J							Δ	
							AD 1.1	
	<u> </u>						JAN L	
	B. Name and A	Address of Current R	tegistered Age	 nt		9. Name and A	ddress of New Reg	istered Agent
PERLOW, JEFFREY M								
% JEFFREY M. PERLOW & ASSOCIATES, P.A.					Street Address (P.O. Box Number is Not Acceptable)			
1820 E. HALLANDALE BEACH BLVD. HALLANDALE FL 33009					Suite, Apt. #, Etc.			
					City			State Zip Code
10. I, being Signature of		ered agent of the abov	ve named corpo	ration, am familiar w	ith and accept the ot	bligations of Section	,	10.7
Registered	Agent		GISTERED AGI	ENT MUST SIGN			Date 1/29	/97
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No X								
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.								
SIGNAT	URE: SIGNATUR	E AND TYPED OF PRIN	NTED NAME OF S	SIGNING OFFICER OR	Presiden DIRECTOR	t	1/29/97 ((954) 456-1633 Daylime Phone #



INTERNATIONAL CIGAR CLUB, INC. 1820 E. HALLANDALE BEACH BOULEVARD HALLANDALE, FLORIDA 33009

January 29, 1997

Ms. Leslie Sellers Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Reinstatement of International Cigar Club, Inc.

Dear Ms. Sellers:

Pursuant to your telephone conversation with David N. Wolofsky, Esq., from the law offices of Jeffrey M. Perlow & Associates, P.A., this letter is to advise you that I never received a copy of the 1996 Annual Report. For that reason, it was never completed and submitted with the appropriate filing fees. I very much appreciate your consideration in waiving the attendant penalties for not having filed the report on a timely basis.

Please find enclosed a completed Application for Reinstatement, along with payment of the sum of \$365.00. This amount represents the \$200.00 filing fee for 1996, and the \$165.00 due for 1997.

Once again, thank you for your understanding in this matter. If you should have any questions, please do not hesitate to contact me.

Very truly yours,

International Cigar Club, Inc.

Misha Shprecher, President

Enclosures