L'LEASE HEAD ALL	INSTRUCTIONS	SBEFORE C	H 3 PAMO:	NG THIS ECHON
APPLICATION FLOR	ORIDA DEPARTME Katherine H Secretary of S	NT OF STATE arris	1	FILED
DOCUMENT # P95000	DIVISION OF CORPO	RATION\$		00 JAN 11 PM 12: 13
1. Corporation Name P. J. L. T	DEUE lope	rs Iuc.		SECRETARY OF STATE ALLAHASSE, FLORIDA
	ng Address			
Mawi, FC. 33/55 Mabove addresses are incorrect in any way. fine through incorrect information and enter c New Principal Office Address, If Applicable 4238 S.W. 75 AVE Suite, Apt. 4, etc. Suite, Apt. 4, etc.			4. Date Incorporated or Qualified To Do Business in Florida	
	State	у	5. FEI Number 6. CERTIFICATE	O6 33283 Not Applied For OF STATUS DESIRED S8.75 Additional Fee require for a Certificate of Status
7. Names and Street Addresses of Each Officer and/or Direct Name of Officers and/or Directors 2. RENE 5. LEON.	Str OI 3 (Do NOT U	etions must list at lea eet Address of Each ficer and/or Director se Post Office Box N	st 3 directors)	City / State / Zip
ST PENE J. CEONARD	SP 28	55 s.w.	,93cf ,33/55	
			40	00030992248 -01/14/0001076019 *****908.75 *****908.75
8. Name and Address of Current Register	ed Agent		9. Name and A	ddress of New Registered Agent
PRNE J. (RONARI) SR. 4855 S.W. 93 Ct. Mauri, Fl. 53465		Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc.		
Mrawi, Fl. 53/65		City State Zip Code		
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obli Signature of Registered Agent REGISTERED AGENT MUST SIGN			ligations of Section	Date
11. This corporation owes the curre Intangible Personal Property Ta	Yes		(See olher side for information on intangible tax.)	
12. I certify that I am an officer or director or the receiver or tru this reinstatement application, the reason for dissolution ha owed by the corporation have been paid and the names of on this application is true and accurate, and my signature s	s been eliminated, the corpo individuals listed on this for	orate name satisfies t m do not quality for a	he requirements o In exemption unde	of section 607.0401 or 617.0401, F.S., (nat all lees

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR