PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** Sandra B. Mortham FILED FOR Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS 97 NOV 25 PM 2: 20 DOCUMENT # P95000082465 SECHERARY OF STATE TALLARASSET, TLORIDA 1. Corporation Name INTERNATIONAL FAMILY DISCOUNT CLUB, INC. Principal Place of Business Mailing Address 306 WHITFIELD AVE. 306 WHITFIELD AVE. SARASOTA FL 34243 SARASOTA FL 34243 If above addresses are incorrect in any way, line through incorrect information and enter correction bolow. 2. New Principal Office Address, If Applicable 3. Now Mailing Office Address, It Applicable Date Incorporated or Qualified To Do Business in Florida 7447 N.Tomiomi Trail O, BOX 10200 Apt. #, etc. roden ton, FI 10/26/1995 5. FEI Number Sarasata, Florida Applied For 65-0559028 Not Applicable \$8.75 Additional Fee required CERTIFICATE OF STATUS DESIRE 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Title(s) City / State / Zip **PVTS** ZICKAFOOSE, MARTHA G 908-WHITFIELD AVE. -SARASOTA-FL-34243---Eugene S. Zickafoose 7747. N. TamiamiTail Sarasota, ITI. 34243 REINSTATEMENT 9. Name and Address of New Registered Adent B. Name and Address of Current Registered Agent Eugene S. Ticksfoose Street Address (P.O. Box Number is Not Acceptable) CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525 12/02/97--01092--001 Jara sota 10. I, being appointed the registered apers of the though bove named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

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.

SIGNATURE:

GHATURE AND TYPEN ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/14/97 (4

(441) 355-1963 Daytimo Phone #