PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOC	JME	NT	#
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P95000084571

1. Corporation Name

FILED

97 JAN 31 PM 3: 44

SECRETARY OF STATE TALLAHASSEE, FLORIDA

M & B	CONCEPTS, INC.				TALLA	HASSEE, LEGITA	
Priocipal Pla	ace of Business	Mailing Addre	BSS		1		
4106 INVERRARY BOULEVARD. UNIT 37A 4106 INVERF LAUDERHILL FL 33319 LAUDERHILL		RARY BOULEVARD, UNIT 37A L FL 33319					
If above ar	ddresses are incorrect in any way, line thro	woh incorrect in	oformation and enter o	xarrection helow	DEM	STATEMEN	IT ale
2. New Prin	Cipal Office Address, If Applicable INVENDANGE BLUCK		ng Office Address, If a		To Do Bus	porated or Qualified	11/03/1995
Suite, Apt. #, etc. Suite, Apt. #,		etc.		5. FEI Number Applied For			
City & State	devill florida	City & State	Country	·	6.		Not Applicable 75 Additional Fee required for a Certificate of Status
	and Street Addresses of Each Officer and/o	r Director (Flo			 		
Title(s) 1	Name of Officers and/or Directors 2		Street Address of Each Officer and/or Director City / State / Zip Co NOT Use Post Office Box Numbers) 4			itate / Zip	
PSTD	PSTD DIAZ, MARLENE		4106 INVERRARY BOULEVARD, UNIT 3		UNIT 3	LAUDERHILL FL 33319	
					9	00002076	38197 01076004
						****375,00	****375.00
						0131	-31-97
	8. Name and Address of Current I	Registered Age	ent	Name	9. Name and	Address of New Registered	
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 343 ALMERIA AVENUE CORAL GABLES FL 33134				Streef Address (P.O. Box Number is Not Acceptable) 6700 BVII RVN RD Suite, Apt. #, Etc.			
40 1 5	\mathcal{L}		Seculi	273 City ///Aym	i Lake	Star FL	e Zip Code 330/4
Signature o Registered	Agent / Agent		ENT MUST SIGN	and accept the c	onigations of Sec	Date	7
11. Do De	es this corporation pay a pt. of Revenue under S.	ny intang 199.032,	jible tax to th Florida Stati	e utes. Yes	□ No □		ide for information angible tax.)
this∉ein owed by	that I am an officer or director or the receivestatement application, the reason for dissor the corporation have been paid and the rapplication is true and accurate, and my stoppication.	lution has been names of individ	eliminated, the corporate in the corpora	prate name satisfies m do not qualify for	the requirement an exemption up	ts of section 607.0401 or 617,	0401, F.S., that all fees
SIGNAT		6					
	SIGNATURE AND TYPED OR PRI	NTED NAME OF	SIGNING OFFICER OR I	DIRECTOR		Date I	Daytime Phone #