PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE FILED Sandra B. Mortham 98 DEC 21 AMII: 22 Secretary of State DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT P95000087836 MARKETING BY MAEL, INC. Principal Place of Business Mailing Address 4571 NW ZOTH AVENUE 4571 NW 70TH AVENUE LAUDERDHILL FL 33319 LAUDERDHILL FL 33319 New Principal Office Address, If Applicable If above addresses are incorrect in any way, line through incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable Date Incorporated or Qualifled
To Do Business in Florida University 11/14/1995 Suite, Apt. #, etc. 5. FEI Number Applied For City & State 65-0619472 Coca 6. Zlo Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) Name of Officers Cltv / State / Zip Title(s) and/or Directors Ρ MAEL, BOBBIE L 4571 NW 70TH AVENUE LAUDERDHILL FL 33319 5 800002722298--12/24/98-01083--022 ****150.00 _ ****150.00 1 12/23 | 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent OICH GLANCY, SUSAN M 3300 UNIVERSITY DRIVE STE 612 CORAL SPRINGS FL 33065 10. I, being appointed the rem ection 607.0505, F.S. Unang un lu Signature of Registered Agent EGIS GENT MUST SIGN 11. This corporation owes or has paid the current year (See other side for information on intangible tax.) No K Intangible Personal Property tax due June 30. Yęs .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.

0047405

SIGNATURE:

November 16,1 Coral Springs, Feb. 33065.