	PLEASE READ	ALL INS	TRUČTI	ONS BEFORE	COMPLE	TING THIS FO	DRM.	
* APPLICA	ATION			MENT OF STATE				
FOR	٦ , , ,		Sandra B. Secretâry			Eu c	5 6	
REINSTAT	EMENT 97	IVISION OF CO	Secretary of State ASION OF CORPORATIONS		FILED			
DOCUMENT # MUXXXXI 1225					99 AUG 31 PM 1: 13			
Corporation Nar	ne ' '			SECRETARY OF STATE TALLAHASSEE, FLORIDA				
	Club Inc.							
Principal Place of B 1618 NW 3	-	Mailing Address 1618 NW 34th Terrace						
Landerhil 4210		Lauderhill, Fl. 33311-			200029828629 -09/09/9901074008 ****465.00 ****465.00			
	are incorrect in any way, line							
	ffice Address, If Applicable		ng Office Address, if Applicable stc.		Date incorporated or Qualified To Do Business in Florids			
Suite, Apt. #, etc. Same					5. FEI Number Applied For			
City & State		City & State	1			52264	Not Applicable	
Zip	Country	Zip		Country	6. CERTIFICATI	OF STATUS DESIRED X	\$8.75 Additional Fee required for a Certificate of Status	
7. Names and Stre	el Addresses of Each Office	r and/or Director	(Florida nonpr			rs)	<u></u>	
Title(s)	Name of Officers and/or Directors		3 (Dol	Street Address of Each Officer and/or Director NOT Use Post Office Box N		4 City/	State / Zip	
P,S, T Stewart Holtzkenner			6001	Enzzinan Dizz	. C T	T and amb ill	E) 22210	
T Stev	wart Holtzkei	mer	9901	Environ Blv	a. DA	Lauderniii	L, Fl 33319	
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1								
								
				·				
			<u> </u>			T. LEWIS AUG 3 1 1999		
8. N	ame and Address of Curre	nt Registered A	gent	Name	9. Name and /	ddress of New Registe	red Agent	
Stewart H		Alan N.	Alan N. Razla P.A. Street Address (P.O. Box Number is Not Acceptable)					
6901 Environ Blvd. Apt 5A				22 Boxwood Road				
Lauderhil	l, Fl. 33319)		Suite, Apt. #, Etc.				
	_		<u>)</u>	City Hollywoo	d, Fl.	s	tate Zip Code L 33021	
•	d the registered agent of the	above named of	orporation, am			Section 607.0506, P.S.	1	
Signature of Registered Agent _(8 (SC)	REGISTERED AG	GENT MUST S	IGN		Date S/W/	55	
	s corporation pay Revenue under S] No		side for information ntangible tax.)	
filing this reinsta that all fees owe	an officer or director or the tement application, the reas d by the corporation have be ated on this application is tr	on for dissolution en peld and the i	n has been elim names of Indivi	inated, the corporate name duals listed on this form do	satisfies the re not qualify for a	quirements of section 60 in exemption under secti	7.0401 or 617.0401, F.S.,	
SIGNATURE:	SIGNATURE AND THEED OR	PRINTED MANUE O	E SIGHING OFFI	CER OR DIRECTOR	1/20	199 95	4-762-6940 Deytine Phone #	
516W1	ARI HOL	CRE (DER			1	· ·	

P96 0000 / 23 2 S ALAN N. RAZLA, PA

(954) 983 - 9394 Broward (954) 292 - 9246 Broward (954) 983 - 6799 Fax

Florida Office

Alan N. Razla, PA 22 Boxwood Road

Hollywood, FL 33021

Email: CHUCHMA@AOL.COM

NHSCPA Member AICPA Member New Hamp. Office

Alan N. Razla CPA, PA 26 South Main Street Suite 521 Concord, NH 03301

25-Jun-99

Dept. of State Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314 RE: The Scrub Club Inc.
Application for Reinstatement.

Dear Sir or Madam,

We are writing regarding the application for Reinstatement of the Corporation as it applies to The Scrub Club Inc. The attorney for this company, being a registered agent was also responsible for the filing of address changes, and timely filing of corporate documents for this company. When our office was assigned to handle all the corporate documents for the client, (6/99) we were informed The Scrub Club, Inc. was no longer active due to the failure to file the necessary reports. This situation was the result of circumstances beyond our control. We are currently sending payment for 3 years. Considering the circumstances of failure to file by our attorney, we are requesting a waiver of penalties.

Sincerely,

Alan N. Razia