PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

P96000015300 **DOCUMENT #**

1. Corporation Name

CAG INC. OF DEERFIELD BEACH

FILED

03 DEC 26 PH 4: 15

SECRETARY OF STATE TALLAHASSIE. FLORIDA

Principal Place of Business		Mailing Address							
3021 VENTNOR H DEERFIELD BEACH FL 33442		3021 VENTNOR H DEERFIELD BEACH FL 33442							
	nformation and enter correction below.		REMSTALLINETIN 27						
			New Mailing Office Address, If Applicable			4. Date Incorporated or Qualified To Do Business in Florida 02/15/1996			
Suite, Apt. #, etc. Suite, A			Apt. #, etc.			5. FEI Numbe	<u> </u>	Applied For	\dashv
City & State	9	City & State	City & State				65-0642561	Not Applicab	
Zip	Country	Zip		Country		6. CERTIFICATI	OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Statu	ired Is
7. Names	and Street Addresses of Each Officer and/	or Director (Flor	rida nonprofi	t corporati	ons must list at lea	st 3 directors)			
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director				City / State / Zip			
D	GROSS, CHARLES B	3021 VENTNOR H			DEERFIELD BEACH FL 33442				
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8. Name and Address of Current Registered Agent					9. Name and Address of New Registered Agent				
GROSS, CHARLES B				•	Name				
3021 VENTNOR H			Street Address (P		P.O. Box Number is Not Acceptable)				
DEERFIELD BEACH FL 33442					-Suite, Apt. #, Etc				— <u>i</u>
				}	City			State Zip Code	\dashv
10. I, being	appointed the registered agent of the abo	ve named corpo	ration, am fa	amiliar with	and accept the ob	ligations of Secti	on 607.0505, F.S. or 61	17.0505, F.S.	

11. 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:

Signature of Registered Agent

Oct 13 VOO3 94-74-0076