						ETING THIS FORM.	
AP	PLICATIONA TO	(0)	A DEPARTMEN Sandra B. Mor		16		
D#14	FORO		Secretary of S		E	ILED	
HEIN	ISTATEMENT		IVISION OF CORPOR	RATIONS	'	• •	
DOC	UMENT # P960 0	0001858	34 •	*	48 AUG	10 PH 1:54	
	ation Name	- INC			LUKLI	LRY OF STATE ASSEE, FLORIDA	
49 I Al	IT INTERNET & MORE	E, INC.			TALLAHA	ASSEE, FLORIUM	
	1			·			
Principal Place of Business Meiling Add 249 N.W. 36TH 6T. 8249 N.W. 36						<u>al ing lang andi gark aand bank aana dark aana dark aana ahad ahad andi bu</u>	
UITE 206 SUITE 206		SUITE 206					
AIAMI FL 33186 MIAMI FL 331			86				
If above a	addresses are incorrect in any way, line	through incorrect i	nformation and enter o	correction below	,		
			iling Office Address, If Applicable		4. Date In	corporated or Qualified Business in Florida 02/27/1996	
Suite, Apt. #, etc. Suite			ite, Apt. #, etc.		5. FEI Nu	· · · · · · · · · · · · · · · · · · ·	- <u></u>
City & State		City & State	City & State			ALCIACO TOPE	ed For Applicable
Zip	Country	Zip	Country	<u> </u>	6.	S8.75 Additional Fe	ee required
				••		CATE OF STATUS DESIRED	of Status
7. Names	and Street Addresses of Each Officers Name of Officers	ind/or Director (Fig	Str	ent Address of F	ech	5)	
Title(s)	and/or Directors		Officer and/or Directors (Do NOT Use Post Office Box		ctor ox Numbers)	City / State / Zip	
D	BENAVIDES, STUART		8249 NW 38TH S	T., STE. 206		MIAMI FL 33166	
D	GRABER, WOODY	8249 NW 36TH ST., STE. 206			MIAMI FL 33166		
COBAR, ROBERTO		8249 NW 36TH ST., STE. 206			MIAMI FL 33166		
A A BUILDING MALLAN			COAC BELL CATHLAT ATT COAC		AUAN EL DAGO		
0/5	BLINDERMAN, RICHARD I		8249 NW 36TH ST., STE. 206		1	MIAMI FL 33166	
D/P	Rogers, John		-			OL MIAMI, F. 2 3316600	By (
·	200	20000261 		64929 -0164007		REINSTATEMENT STOP	
		****908.	75 ****90 8	25		(A)	
8, Name and Address of Current Registered Agent				9. Name and Address of New Registered A		nd Address of New Registered Agent	
BLINDERMAN, RICHARD I				Name	JDerma	y Richard T	
	TIRLING RD., STE. 101		Street Address	ss (P.O. Box Nun	nbef is Not Acceptable)		
FT. LAI	UDERDALE FL 33312			Suite, Apt. #,	Stinli Etc.	NO RO.	 ;
				City	<u>pubent</u>	State Zip Opde FL	
10. I, bein	g appointed the registered agent of the	hove named corp	oration, am familiar wi	th and accept th	ne obligations of 8		
Signature o Registered	of Agent	REGISTERED AC	BENT MUST SIGN			Date 2-26-98	
	nis corporation owes or tangible Personal Prop			ar Yes [] No ⊠	(See other sid e for information on int an gible tax.)	n
12. I certify this reir owed b	nis corporation owes or tangible Personal Properties of the Personal Properties of the reason for director or director or the reason for director or the reason for director or director o	has paid the erty tax due deceiver or trustee el issolution has beer he names of individ	e current year June 30. Impowered to execute a eliminated, the corporula listed on this form	this application rate name satism do not qualify	as provided for Ir fies the requirem for an exemption	(See other side for information	n filing

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Date Daytime Phone #4181

SIGNATURE: