PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.     APPLICATION     FLORIDA DEPARTMENT OF PLATE     FOR     FOR     FOR     Secret n contact     Division of corporations     FILED	$\bigcirc$
DIVISION OF CORPORATIONS FILED	
$\Box$	
DOCUMENT # 79600025341 98 JUL -6 PN 2:06	1
1. CORPORATION NAME MONSTER DQ. INC. SECURITARY OF STATE	
DBA / DAIRY QUEEN TALLAHASSEE, FLORID.	
Principal Place of Business Mailling Address 9557 N.W. 41 STREET 7520 S.W.171 ST. MINMI, FL 33178 MIN, FL. 33157	
If above addresses are incorrect in any way, line through incorrect information and enter correction below.         2. New Principal Office Address, If Applicable         3. New Mailing Office Address, If Applicable         4. Date Incorporated or Qualified         To Do Business in Florida	-96
Suite, Apt. #, etc. 5. FEI Number	Applied For
City & State FL 65-0664012	Not Applicable
CERTIFICATE OF STATUS DESIRED 1 tor a C	Certificate of Status
Names and Street Addresses of Each Olficer and/or Director (Florida nonprofit corporations must list at least 3 directors)           Name of Olficers Title(s)         Street Address of Each and/or Directors         City / State / 2	
$\frac{1}{2}$ $\frac{3}{2} (Do NOT Use Post Office Box Numbers)} = 4$ $\frac{1}{2} \sqrt{2} \sqrt{2} \sqrt{2} \sqrt{2} \sqrt{2} \sqrt{2} \sqrt{2} $	
PRES, Reith ST. CLNIR	
V.P. Johnnita St. Clair 7520 SW171 ST. MINMI, FC	- 33157
1000025851;	
-07/10/980104 *****315.00 **	100015all
	165 pp
	210
B. Name and Address of Current Registered Agent         D. Name and Address of New Registered Agent           Name         ハロディノン カノノ アノ クテリ	
Street Address (P.O. Box Number is Not Acceptable)	CR2E040 (1/98)
Suite, Apt. #, Etc.	CG
	33/43
10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.	
Registered Agent Date	0
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No	
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 this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401. For owed by the corporation have been paid and the names of individuals listed on the form do not qualify for an exemption under section 119.07(3)(i), F.S. The in on this application is true and accurate, and my signature shall have the order logal effect as if made under oath.	S., that all fees formation indicated

BLUE MONSTER DQ INC 9557 NW 41 ST MIAMI FL 33178

FLORIDA DEPT OF STATE DIVISIONS OF CORPORATIONS PO BOX 6327 TALLAHASSEE FL 32314

JUNE 16,1998

**RE: REMOVE PENALITY ON RENEWAL** 

PLEASE RENEW BLUE MONSTER DQ INC 65-0664012 DOCUMENT P6000025341 FOR 1997 AND 1998. I NEVER RECEIVED THE RENEWAL FORM FOR 1997 OR 1998 AND HAD TO REGUEST FORM FOR 1998.I CALLED THIS MORNING AND WAS TOLD TO SEND CHECK FOR 315.00 TO RENEW BOTH YEARS AND ASK TO HAVE PENALITY REMOVED THAT I RECEIVED IN LETTER. I HAVE THREE OTHER CORPORATIONS AND THEY ARE RENEW ON A TIMELY MANER.

THE BUSINESS ADDRESS FOR THE CORPORATON 9557 NW 41 ST BUT THE OFICE ADDRESS IS 7520 SW 171 ST MIAMI FL 33157 . THIS CORP WAS FORMED IN 1996 BUT NEVER OPENED FOR BUSINESS TILL FEBRUARY 1997. IF YOU HAVE ANY QUESTION PLEASE CALLL 305 233 1884 FAX 305 262 6831

RESPEC TH &T/CLAIR