,	LI MOTOLIOTIO	NO DEFORE		INO THORSONA		
APPLICATION OF FOR A PREINSTATEMENT	FLORIDA DEPARTMEN Sandra B. Mort Secretary of St DIVISION OF CORPORA		AND FILED  1998 APR -3 M 9: 29			
DOCUMENT # P96000034337			SECRETARY OF STATE TALLAMASSEE, FLORIDA			
MACAULAY INVESTMENTS, CORPORATION				3111 · 4 · ·		
Principal Place of Business Mailing Address  7365-NW-60-Lane- Parklandy-F1-33067						
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 Incorp	orated or Qualified		
5601 NW 15 Avenue Suite, Api. #, etc.	5601 NW 15 Avenue Suite, Apt. #, etc.		To Do Business in Florida  April 16, 1996  5. FEI Number  Applied For			
City & State Ft. Lauderdale FL Zip Country Broward	. 4 4 4 4 4	F1 Country Broward	6. CERTIFICATE OF STATUS DESIRED X \$8.75 Additional Fee required for a Certificate of Status		ional Fee required	
7. Names and Street Addresses of Each Officer and/o		orporations must list at lea				
Title(s) and/or Directors Of		Street Address of Each Officer and/or Director IOT Use Post Office Box N	•	City / State / Zip		
P Rafael Zur 5601		W 15 Avenue	Avenue Ft. Lauderdale FL 33309		33309	
	300002482163				36	
				-04/08/9801015	*908.75	
					80	
		REINSTATEMENT 4/5/98				
8. Name and Address of Current Re	egistered Agent		9. Name and A	ddress of New Registered Agent		
Allen, -Mischell Willi			am J. Brown, Esq.			
7365-NW-60-Lene Parklandy-F1-33067	, ,	William J. Brown, Esq.  Street Address (P.O. Box Number is Not Acceptable)  777 Brickell Avenue, Suite 1114  Suite, Apt. #, Etc.				
City  State Zip Code  Mi am i  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.						
Signature of Registered Agent Date 3/31/98						
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.  Yes No X  (See other side for information on intangible tax.)						
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 fisted 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 securate, and my signature shall have the same legal effect as if made under oath.						
SIGNATURE:  SIGNATURE IND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR - 3/31/98  Date - (305)299-2995						