PLEASE APPLICATION		DA DEPARTMENT	OF STATE	OMPLETI	NG THISA	AND		
FOR		Sandra B. Mortha Secretary of Stat				FILEU		
REINSTATEMENT			98 MAR 12 PM 2: 36					
DOCUMENT # 1000090097				SECRETARY OF STATE TALLAHASSEE, FLORIDA				
1. Corporation Name					1ALLAIIA			
LAhnolsen J	<u>ис</u> Mailing Ad	dress						
	1329 MS	Conine ST						
If above addresses are incorrect in any		IIE 1. 322 tinformation and enter corre		REM	STATE	: Ment	97-98	
2. New Principal Office Address, If Appli	cable 3. New M	3. New Mailing Office Address, If Applicable			4. Date Incorporated or Qualified To Do Business in Florida 531.90			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. FEI Number			
City & State		City & State		6. SR 75 Additional Fee required				
Zip Country	Zip	Country		CERTIFICATE	OF STATUS DESIRI	ED De lor a Certifi	cate of Status	
7. Names and Street Addresses of Each Name of	Officers	Street	Address of Each					
Title(s) and/or [Pirectors	Officer and/or Directo 3 (Do NOT Use Post Office Box			4	City / State / Zip		
PROST HAI WESTON		1329 ME Comilie ST			JAX. 31.	32209		
pres / Solumon Weston		1329 MCConihest			Jan. 11. 32209			
				10	03/12	45572 2/9801037 309.00 ****	16 001 *903.00	
8. Name and Address of Current Registered Agent Nar			9. Name and Address of New Registered Agent Name					
MAI Weston	S	treet Address (P	2.O. Box Number Is Not Acceptable)					
1329 M⊆ Cruike St.		Suite, Apt. #, Etc		P.O. Box Number is Not Acceptable)				
5AX. 11. 32209		City			State Zip Cod	e		
10. I, being appointed the registered age Signature of Registered Agent	Veston	rporation, am familiar with a AGENT MUST SIGN	nd accept the ob	ligations of Sectio		-12-98		
11. This corporation ow Intangible Personal			Yes 🗖	No 🖸	(Se	e other side for inform on intangible tax.)	nation	
12. I certify that I am an officer or director this reinstatement application, the rea owed by the corporation have been p on this application is true and accurate	son for dissolution has be aid and the names of indi	en eliminated, the corporate riduals listed on this form do	name satisfies to not qualify for a	he requirements o In exemption unde	f section 607.040	1 or 617.0401, F.S., t	hat all fees	
SIGNATURE: AND L		F SIGNING OFFICER OR DIRE	Стоя	13-12-	98 Date	791-902- Daytime Phone	7	

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