PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

99 FEB 15 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000062447

1. Corporation Name
FLORIDA PRECISION LAND & BUILDING COMPANY

Principal Place of Business
6322 PEMBROKE ROAD
MIRAMAR, FL 33023

Mailing Address
P.O. BOX 814207
Hollywood, FL 33081

REINSTATEMENT 98-99

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable
6322 PEMBROKE ROAD
Suite, Apt. #, etc.
City & State: MIRAMAR FL
Zip: 33023 Country: USA

3. New Mailing Office Address, If Applicable
P.O. BOX 814207
Suite, Apt. #, etc.
City & State: HOLLYWOOD, FL
Zip: 33081 Country: USA

4. Date Incorporated or Qualified To Do Business in Florida: 7/24/96

5. FEI Number: 65-0738104 — Applied For / Not Applicable

6. CERTIFICATE OF STATUS DESIRED [X] **$8.75 Additional Fee required for a Certificate of Status**

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D, P, T, S	REILLY, THOMAS	6322 PEMBROKE ROAD	MIRAMAR, FL 33023

500002780893--5
-02/19/99--01078--012
****908.75 ****908.75

8. **Name and Address of Current Registered Agent**
REILLY, THOMAS
6322 PEMBROKE ROAD
MIRAMAR, FL 33023

9. **Name and Address of New Registered Agent**
Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City — State FL — Zip Code

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: [signature] REGISTERED AGENT MUST SIGN — Date: FEB. 11, 1999

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes [X] No [ ]
(See other side for information on intangible tax) 2-19-99

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 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] PRESIDENT — FEB 11, 1999 — (305) 785-8932
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E081 (12-98)