				D==0D= 0				
	PLEASE READ A	FLORIDA S	RUCTIONS  A DEPARTMEN  Sandra B. Mort  Secretary of S  IVISION OF CORPOR	IT OF STATE tham tate	1	ING THIS FO APPEQ AND FILE	HM. Nato Ma D	1012
DOCUMENT # <b>P96000067039</b>					97 DEC 10 AM 9: 05			
1. Corporation Name KENDALL KITCHENS, INC. 97 AR					SECRETARY OF STATE PALLAHASSEE, FLORIDA			
14900 S.W. 82ND TERRACE #204		Malling Address 14900 S.W. 82ND TERRACE #204 MIAMI FL 33193						
			ng Office Address, If y	Applicable SAVE Vida	5. FEI Numbe	orated or Qualified ness in Florida r E OF STATUS DESIRED	\$8.75 Additio	Applied For Not Applicable and Fee required leate of Status
7. Names a	and Street Addresses of Each Officer and/o Name of Officers and/or Directors	et Address of Each	1		City / State / Zip			
D DUNSTAN, SCOTT			3 (Do NOT Us 14900 S.W. 82NE	icer and/or Director to Post Office Box N TERRACE	mbers) 4 MIAMI FL 33193			
D DUNSTAN, STACEY			14900 S.W. 82NE	) TERRACE	C	MAM EU 63/63 3 -12/16/ -4***16	3 <b>737</b> 3 9701076 5.00_***	151 3018 *165.00
				**************************************		(1, all	w 10/97	
8. Name and Address of Current Registered Agent Name						Address of New Regis	stered Agent	
14900 #204	'AN, SCOTT S.W. 82ND TERRACE FL 33193		Street Address (I	49 SV	SCOTT is Not Acceptable) W. 118 A	VC_ State   Zip Coo	20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
v 10. <b>4</b> , being	appointed the registered agent of the above	re named corpo	oration, am familiar wi	th and accept the o	\\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		FL  3.	<u> </u>
Signature o Registered	AgentCOLO CL =	3	NSTW.	<b>&gt;</b>		Date 12/	2/97	
	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 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 12/2/97 (305)378-0502								

Pg. 2012

## Kendali Kitchens, Inc.

20949 S.W. 118 Ave Miaml, FI 33177

December 2, 1997

Department of State
Division of Corporations
P.O.Box 6327
Tallahassee, Fi 32314-6327

Dear Sir or Madam:

This letter is in reference to the conversation I had yesterday morning with your department. As I explained, we did not receive any notification to renew our corporation. I believe the reason for the confusion is that we had moved. The previous address was 14900 S.W. 82 Tem., Apt 204, Miami, FI 33193. The new address is 20949 S.W. 118 Ave., Miami, FI 33177. As with any move, the forwarding address was given to the post office, but mix-ups occur and the mail has been coming 3-4 weeks later or not at all. As in the case with our renewal.

We greatly appreciate your patience and understanding. This is our first year in business and we have not gotten accustomed to the paperwork and annuals.

Enclosed is a check for \$ 165.00, as requested for reinstatement.

Scott C. Dunstan

Sincerely,

Scott Dunstan Owner