PLEASE READ ALL INSTRUCTIONS BEFORE CO					ING THIS FORM.	
APPLICATION FOR REINSTATEMENT	!	A DEPARTMEN Sandra B. Mor Secretary of S VISION OF CORPOR	tham State		FILED	
DOCUMENT # P960000 74281			9	18 FEB 24 AN 9: 31		
1. Corporation Name			SEORE MRY OF STATE TALLAMASSEE, FLORIDA			
TRANSEURO HOLDINGS, INC.					IMERIAL POPULA COMPANY	
Principal Place of Business Nailing Address 1445 S.E 3 Court 265 S. Ferrar Hwy STE Suite 206 Deer field Beach, FL 33441 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 Maili Suite, Apt. #, etc. Suite, Apt. #,		ng Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida 9-8-96		
City & State City & State				5. FEI Number	Applied For Not Applicable	
Zip Country	Zip	Zip Country		6.	CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/	or Director (Flo	· · · · · · · · · · · · · · · · · · ·				
Title(s) and/or Directors Officer and/or 1 2 3 (Do NOT Use Post C				umbers)	City / State / Zip	
Pres. PATRICIA A. LINCOL	1646 SG. 3rd Court, Sto Deerfield Bch. Fc 334			Deerfield Bch, Fissyy		
VP LEO JACOBS					Deerfield Beh. FLESMY	
Sed TITLE DIANNE WILLIAMS					Deerfield Bch, FL 33441 Deerfield Bch, FL 33441	
		RI	INSTA	TEME	NT_97-98	
					GL 2-25-98	
8. Name and Address of Current Registered Agent ELIZABETH DUBOIS Name			9. Name and A	ddress of New Registered Agent		
DAVIE, FL 33326 Street Address of Suite, Apt. #. Etc.			Street Address (P		s Noi Acceptable)	
DAVIE, FL 3332C Suite, A			Suite, Apt. #, Etc.	8 %	-0272679801087031 ****900.00 ****900.00	
Elylos Dukais				State 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 Date Date REGISTERED AGENT MUST SIGN						
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (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 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: MILICA LUNCOLN PATRICIA UNCOLN 2-18-98 954-360-7783						

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