EAD ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State FILED DIVISION OF CORPORATIONS DOCUMENT # -- P96000092464 02 NOV -5 PM 4: 30 1. Corporation Name SECRETARY OF STATE TALLAHASSEE, FLORIDA PATRIOT CONVENTION SERVICES, INC. Principal Place of Business Mailing Address 1861 N POWERLINE RD 1861 N POWERLINE RD POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 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 Date Incorporated or Qualified To Do Business in Florida 11/12/1996 Suite, Apt. #, etc. Suite, Apt.,#, etc. 5. FEI Number Applied For 65-0706635 City & State City & State Not Applicable Zip Country Zip \$8.75 Additional Fee required Country CERTIFICATE OF STATUS DESIRED . 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) Name of Officers Street Address of Each Title(s) City / State / Zip and/or Directors Officer and/or Director SORRENTI, JOSEPH 648 NE 40TH CT OAKLAND PARK FL Somenti, Christopher 3550 Hilloboro Hud #201 Coconut Creek, FC 33073 05/29/02 90697 046 **#**150.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent Name SORRENTI, JOSEPH Street Address (P.O. Box Number is Not Acceptable) 8035 NW 15 MANOR **PLANTATION FL 33322** Suite, Apt. #, Etc. Zip Code City 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. or 617.0505, F.S. Signature of Registered Agent 11. 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:

Daytime Phone #

Tala



Chris Soffenti (operations manager, vp) **Patriot Convention Services, Inc.**

1861 N. Powerline Road, Suite E Pompano Beach, FL, 33069

SOUTH FLORIDA'S MOST RECOMMENDED TRADE SHOW DECORATOR

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November 12, 2002

MICHELE MILLIGAN,

I AM SENDING THIS LETTER ALONG WITH MY REINSTATEMENT FORM. AS PER OUR CONVERSATION ON FRIDAY MY COMPANY DID PAY THE \$150.00 FEE BACK IN MAY. THE RELECTION OF FILL OUT. SINCE THE DIVISION OF CORPORATIONS DID NOT HAVE OUR LIST OF OFFICERS THEY DECIDED TO DISSOLVE OUR COMPANY, I AM ASKING THAT THE FEE OF \$600.00 BE WAIVED FOR NON-RECEIVEMENT OF THE LIGHT OVER. I DO APOLOGIZE FOR ALL THE EXTRA OFFICE WORK INVOLVED IN REINSTATEMENT.

Thank you

CHRIS SORRENTI operations manager, v.p.