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## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	RPORATI STATEM				DEPAR Secretar	y of	State				511.57 7 JUL 19 AM	7: 2 <sup>L</sup>		
DOCUMENT # P96000101025  1. Corporation Name									ACTUAL OF STARE ALLAHASSEE, I LORIDA					
Executive Management Systems , Inc.										400106615034 07/24/0701017009 **1058.75				
										EIN	NSTATE	M	ENT()	
2. Principa	ai Office Addre	P.O. Box #	3. Mailing O	3. Mailing Office Address							/1 V I	11110		
420 8	S. Dixi	420 S. Dixie Highway					CR2E081 (1/07)							
Suite, Apt. #, etc.				Suite, Apt. #, etc.					4. Date Incorporated or Qualified To Do Rusiness in Florida 12/11/1996					
City & State	<del></del>	City & State					To Do Business in Florida 12/11/1990							
Hallandale Beach, FL				Hallandale Beach, FL					<b>5.</b> FE! Number   Applied For   65-0713136   Not Applicable					
Zip	Country			Zip		Country		6.	TIFICATE	OF STATUS OF SIDED	\$8.75 A	dditional Fee required		
33009	09 United States		33009		Uni	nited States		GER	IIFICATE	OF STATUS DESIRED	for a 0	Certificate of Status		
7. Name and Address of Current Registered Agent														
Name William Kent									The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not					
Street Address (P.O. Box Number is Not Acceptable)														
5430 N. 37th Street Suite, Apt. #. Etc.														
Control, repr. in, Cita.										received and requesting the reinstatement fee be waived.				
City Hollywood							State Zip Code FL 33021							
			ed agent of the above	re named corpo	ration, am t				bligations	of section	on 607.0505 or 617.0503,	F.\$.		
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.  Signature of Registered Agent														
REGISTERED AGENT MUST SIGN														
9. Names	s and Street A	ddresses	of Each Officer and	or Director (Flo	rida nonpro	ofit co	·			ctors)				
Titles	Name of Officers and/or Directors			Street Address of Ea Officer and/or Direc							City / State / Zip			
P/S	William Kent			5430 N. 37th Street					Hollywood, FL 33021			33021		
V	Mary Jane Kent			5430 N. 37th Stre			Street	t .		Hollywood,	FL	33021		
<u> </u>								<del></del>						
					, , , , ,								_	
10. 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 filling 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 contained in Chapter 119, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Daylime Phone #														
		_											x7/20	

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## **EXECUTIVE MANAGEMENT**

420 South Dixie Highway Hallandale, FL 33009 (305) 866-3409 (954) 454-2530

July 11, 2007

FLORIDA DEPARTMENT of STATE Division of Corporations

RE: Corporation Renewal

To Whom It May Concern:

Please be advised, upon moving to our new offices located at 420 South Dixie Highway in Hallandale, Florida, from 17031 West Dixie Highway in North Miami Beach, Florida, no Renewal of Corporation was received.

A Change of Address was submitted to the Post Office and to date, all addressed mail to North Miami Beach has been received here at our Hallandale address. I am unaware why this document was never sent or received, allowing us to renew or correct our status.

Thank you for your attention given to this matter.

Sincerely,

Bill Kent, President

**EXECUTIVE MANAGEMENT** 

BK:me