PLEASE READ ALL INSTRUCTIONS BEFORE CONTROL APPLICATION FOR FOR Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS							7			
DOCUMENT # P97000033531							98 DEC 17 PH 2: 32			
1. Corporation Name										
AUGUSTINE HEARD & COMPANY, INC.							SECRETARY OF STATE TALLAHASSEE, FLORIDA			
Principal P	lace of Business	Mailing Address								
1855 GRIFF DCOTA BUI DANIA FL 3	LDING. SUITE H-370	1855 GRIFFIN ROAD DCOTA BUILDING. SUITE H-370 DANIA FL 33004								
	addresses are incorrect in any way incipal Office Address, If Applicab		gh incorrect Information and enter correction below.  3. New Mailing Office Address, If Applicable				Date Incorporated or Qualified			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				To Do Business in Florida 04/14/1997				
City & State	3	City & State				5. FEI Number Applied For Not Applied For Not Applicable				
Zip Country			Zip Country				6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status			
7. Names	and Street Addresses of Each Off Name of Offi		or Director (Flo	rida nonprofit c		ions must list at lea				
Title(s)	and/or Directors Off				Offi	cer and/or Director Post Office Box No		City / Star	te / Zip	
P	CHAMBERLAIN, JOHN H 1201			1201 SE 6T	201 SE 6TH ST.			FT. LAUDERDALE FL 33301		
S	CHAMBERLAN, ANA MARIA	1201 SW 6TH ST.			,	FT. LAUDERDALE FL 33301				
	REI	NST	TATEN	AENT.	q		B. 10	2/18/98 00027225 00027225 -12/24/98-011	545 096009 ****750.00	
8. Name and Address of Current Registered Agent							Name and Address of New Registered Agent			
CHAMBERI AIN JOHN H						Name Street Address (P.O. Box Number is Not Acceptable)				
1201 S.W. 6TH ST. FT. LAUDERDALE FL 33301					ļ	Suite, Apt. #, Etc.				
					City State Zip Code					
10. I, being appointed/the registered applied the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.										
Signature o Registered	Agent		GISTERED AG	ENT MUST SIG	 3N	IRED		Date / /2/	14/98	
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No O (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 filling this reinstatement application, the reason or 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #										