

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 APR 29 PM 4:18
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P97000037037

1. Corporation Name

Total Marketing Solutions, Inc.

Principal Place of Business

2880 West Oakland
 Park BWD #100
 Fort Lauderdale FL 33311

Mailing Address

3116 N. Federal Hwy
 # 267
 Lighthouse Point FL 33064

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc

City & State

Zip

Country

REINSTATEMENT
 To Be Incorporated or Qualified To Do Business in Florida

5. FEI Number

65-0747105

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

98-99
 DW

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	Keith Grout	484 NW 38 th Terrace	Deerfield Beach FL 33442

700002859367-4
 -04/30/99--01138--022
 ****900.00 ****900.00

8. Name and Address of Current Registered Agent

AmeriLawyer
 343 Almeria Avenue
 Coral Gables, FL 33134

9. Name and Address of New Registered Agent

Name
Spiegel & Utrera, P.A.
 Street Address (P.O. Box Numbers Not Acceptable)
 343 Almeria Avenue
 Suite, Apt. #, Etc

City
 Coral Gables

State | Zip Code
 FL | 33134

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 By:

Spiegel & Utrera, P.A.
Natalia Utrera, Vice President

Date 4/28/99

11. This corporation owes 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 individual's listed on this form do not qualify for an exemption under section 119.07(3)(g), 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:

Keith Grout
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/99 954-478-4855
 Date Time Phone #

CP-2029 (12-98)