PLEASE READ A	ALL INSTRUCTIONS	BEFORE CON	MPLETING THIS FORM.	
APPLICATION	FLORIDA DEPARTMENT OF STATE		notes and a second of	
FOR	Sandra B. Mortham Secretary of State		- Park to be seen and	
REINSTATEMENT	DIVISION OF CORPORATIONS		FILED	
DOCUMENT # P97000042154 1. Corporation Name		,	98 NOV 17 AM 10: 14	
INTERACTIVE MARKETING & ADVERTISING GROUP, INC.		P INC	SECRETARY OF STATE TALLAHASSEE, FLORIDA	
in the manufacture of Appel Holling and the Holling			TALLAHASSEE. FLORIDA	
Principal Place of Business Mailing Address				
1892 SOUTHEAST ELROSE STREET PORT ST LUCIE FL 34952 1892 SOUTHEAST ELROSE STREET PORT ST LUCIE FL 34952				
If above addresses are incorrect in any way, line thro	ough incorrect information and enter c	orrection below.		
New Principal Office Address, If Applicable 3. New Mailing Office Address, If.		Applicable 4.	Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc. Suite, Apt. #, etc.			95/13/1997 FEI Number Applied Fo	
City & State	City & State		5-07524/2 Not Applied	
Zip Country	Zip Country	6.	CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee red for a Certificate of Sta	uire itus
7. Names and Street Addresses of Each Officer and/o		ions must list at least 3 d et Address of Each	directors)	
		cer and/or Director	rs) 4 City / State / Zip	
PSTD. WILKINS, RICHARD & DECEASED) 1892 SOUTHEAST ELROSE ST		T-ELROSE STREET	PORT-ST-LUCIE-FL-34952	
VD WILKINS, DOUGLAS S 1892 SOUT		T ELROSE STREET	PORT ST LUCIE FL 34952	
		-		
PSTD WILKINS, KATHREN 1892 SE ELROSE		crose st.	PORT ST. LUCIE FI 34	25
		,	. ,	
		13-11	19/98 AR	
8. Name and Address of Current R	tegistered Agent		Name and Address of New Registered Agent	
AMERILAWYER CHARTERED Street Address				
343 ALMERIA AVENUE		Street Address (P.O. Box Number is Not Acceptable)		
CORAL GABLES FL 33134		=11/23/9801146011		
↑ City			****150.sulia z*****150.0 FL	U
10. I, being appointed the registered agent of the above Signature of	re named corporation, am familiar with	h and accept the obligation		
Registered Agent	GISTERED AGENT MUST SIGN	INED	Date	
11. This corporation owes or ha Intangible Personal Property	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: DOTALAS S. F.V. CHEROS IRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			11-13-1998 335 7309 Date Daytime Phone #	

Friday, November 13, 1998

Division of Corporations Annual Report P.O. Box 6327 Tallahassee, Florida 32314-6327

Re: Payment and Reinstatement

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To Whom It May Concern:

We want to reinstate our corporation, Interactive Marketing and Advertising Group, Inc.

I called this morning (850-487-6059) and spoke to one of your helpful representatives about the form we received. He explained that I needed to do the following;

- 1. Send in a check to the Secretary of State for \$150.00.
- 2. Remove our Father, PSTD, who passed away last year, and add our Mother as President.
- 3. Send this letter explaining our circumstances.
- 4. Need to file Annual Report between January and May, 1999.

We did not receive any forms and believed our Registered Agent, AMERILAWYER, sent in any paperwork.

Please find enclosed a check in the amount of \$150.00.

Thank you for assisting us.

Sincerely,

Douglas Wilkins Vice President

Interactive Marketing and Advertising Group, Inc.

1892 South East Elrose Street

Port Saint Lucie, Florida 34952