				(ODM)/	Reinstatement	
DOCUMENT # P 97 000046163 1. Entity Name					FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA	
MSM (JSA, INC.				01 OCT 30 PM 5: 31	
Principal Place	e of Business	Mailing Address		· · · · · · · · · · · · · · · · · · ·		
15 Su	unshine Blvd. c	/o Duccio Morti	illar	o, Esq.		
Ormon	nd Beach, F1 3 2 174 7					
	·	os Angeles, CA	9001	7-5825		
2. Principal P	lace of Business	3. Mailing Address			·	
<u>, </u>		c/o Duccio Mortillaro, Esq.		aro, Esq.		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		T 10:1	REINSTAMENTER (T)	
City & State		2029 Century Park East, 19th City & State				-
	····	Los Angeles, (4. FEI Number	ļ
Zip	Country	Zip	Count	try ;	5. Certificate of Status Desired 🛱 \$8.75 Additional Fee Required	
	6. Name and Address of Current I	Registered Agent			7. Name and Address of New Registered Agent	ĺ
	··· ·			Name CT Cor	cporation System	
Corporation Service Company					PO. Box Number is Not Acceptable) South Pine Island Road	
	Hays Street ahassee, FL 32301			1200 8	South Fine Island Road	
142.20				City	7) Fit 7in Code	Ì
	·				Plantation FL Zip God 324	
8. The above	named entity submits this statement for	the purpose of changing its	registere VVV	ed office or register	ed agent, or both, in the State of Florida.	
SIGNATURE _	Comie Bru	S	PECIA	IL ASSISTAN	T SECRETARY 10-30-01	
	Signature, typed or printed name of registered agents	nd title if applicable. (NOTE	E: Registered	d Agent signature required	when reinstating) DATE	l
Tax filing re	vation is eligible to satisfy its Intangible equirement and elects to do so. ia on back)	Anter MAY (1, 20) Yalter MAY (1, 20) Yalter Check Payals	01 Fee	will be \$550.00	10. Election Campaign Financing \$5.00 May Be	
11.	OFFICERS AND	DIRECTORS .	12.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	_
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