	/ * A						$eta(t,t)$, $t\in \mathbb{N}$	{
H9900001296	B 5 '							`
APPLICATION OF ONE POR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Harria Secretary of State DIVISION OF CORPORATIONS			in I		solitiy na i pet ce h.s.	
DOCUMEN 1. Corporation Nau	T # P97000061976						STATE OF THE STATE	
-	caler Solutions, Inc.							aan
Principal Place of i	Business	Mailing Address					REINSTATEMENT A	37184
						:	3. Date incorporated or Qualified 3a. Date of Last Ri 7/15/97	port
2. Principal Place of	of Business Road, 2nd Floor	2a. Malling Address					4. FBI Number Applied Not App	
Sults, Api. 0, etc. 22		Suite, Apt. #, etc.					S. Certificate of Status Desired Pee Required	
City & State 23 Margate FL		City & State					6. Election Campaign Financing 55.00 May Trust Fund Contribution Added to Fees	Be
Zip 34 33063	County 25	Zip 29	County 30				8. This corporation has liability for intengible tax under 199.032, Florida Statutes Yes No	,
9. N	ame and Address of Current R	egistered Agent		81	Name	10. N	ame and Address of New Registered Agent	
Richard Morgan 200 S. Biscayne				-	644 (P.C	D. Box Number Is Not Acceptable)		
Mismi, FL 3313	31		83					
				84	City		FL 85 Zip Code	
	provisions of Sections 607,1508, t, or both, in the State of Florida with, and accept the obligations	or positor por votos, r	JOHN DI	LLUC	54.		this statement for the purpose of changing its registered of directors. I hereby accept the appointment as regi	office boross
SIGNATURE ST	here, typed or pristed name of registers		in by C	OTE	Rogizment Agen	e algentu	re required when reinstation) DATE	
TILE	OFFICERS AND DIRE	CTORS DELETE	13.			TIONS	ACHANGES TO OFFICERS AND DIRECTORS IN 12	
NAME	Bruce Dier 2000 Banks Road, 2nd Ploor Margate, FL 33063	, same	•	TRE	_	 	☐ Change ☐ Ad	dition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Gary Dier 2000 Banks Road, 2nd Ploor Margate, FL 33063	DRLETE	2.1 T 2.2 N 2.3 S	ITU IAM ITRE	E B BET ADDRESS		☐ Change ☐ Ad	dition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DBLETS	3.1 T 3.2 N 3.3 B	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP			☐ Change ☐ Ad	dition
TTILE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	4.1 T 4.2 N 4.3 S	ITLE IAM TRE	E B ST ADDRESS		☐ Change ☐ Ad	dition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DELETE	5.1 TI 5.2 N 5.3 \$	ITLE AM TRE	E Et address	L	☐ Change ☐ Ad	lition
TITLE NAME STRIET ADDRESS CHY.ST.ZIP		☐ DELETE	6.1 Ti 6.2 N 6.3 S	TRE	E BT ADDRESS	1	☐ Change ☐ Ad	1
14. I do hereby car the information ind oath; that I am an o my same appears in SIGNATURE	ify that the information supplied licated on this annual report or sufficient or director of the corporate Block 12 or Block 13, or on attribute the supplied of PRINTED OF PRINTED OF PRINTED	ion or the receiver or tr schment with an address Bruce Die	t qualify ort is true valoe em s. or by G.K	for in and in an and in an	vered to execu urode as attorn	ite this	In Section 119.07(3)(i), Florida Statutes. I further certifay signature shall have the same logal affect as if made report as required by Chapter 607, Florida Statutes; an fact 5/28/99 305-672-0686	y that under d that



Florida Department of State Division of Corporations

Division of Corporations
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Katherine Harris, Secretary of State

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From:

Account Name: CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053
Phone: (305)672-0686
Fax Number: (305)672-9110

CORPORATION REINSTATEMENT

BROKER DEALER SOLUTIONS INC.

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