DOCUMENT # P97000071259  1. Corporation Name  SCHORR INVESTMENT, INC.  2. Principal Office Address 11767 S. Dixte Hwy 11767 S. Dixte Hwy 2 C/O Mail Boxes, Etc 2 County Apt #, etc.  Suite, Apt #, etc.  City & State Miami, FL  Miami, Dade  7. Name and Address of Current Registered Agent  Name  Kenneth A. Schorr  Street Address (P.O. Box Number is Not Acceptable) 6330 NW 40th Street  Suite, Apt #, etc.  City  Miami  Legistered Agent  REGISTERED AGENT MUST SIGN  Name of Officer and/or Directors  Officer and/or Director  City Name of Officer and/or Directors  Officer and/or Director  City Name of Officer and/or Directors  City Street Address of Each Officer and/or Directors  City Street Address of Each Officer and/or Director  City Name of Officer and/or Directors  City Name of Officer and/or Director City Officer C	FILED FARY OF STATE OF CORPORATIONS
2. Principal Office Address 11767 S. Dixie Hwy C/O Mail Boxes, Etc 11767 S. Dixie Hwy C/O Mail Boxes, Etc Suite, Apt. #, etc.  3. Mailing Office Address 11767 S. Dixie Hwy C/O Mail Boxes, Etc Suite, Apt. #, etc.  4. Date Incorporated or Qualified To Do Business in Florida To Do	26 PM 4: 40
2. Principal Office Address 11767 S. Dixie Hwy C/o Mail Boxes, Etc Suite, Apt #, etc.  2. Suite, Apt #, etc.  2. Suite, Apt #, etc.  2. Suite, Apt #, etc.  3. Mailing Office Address 11767 S. Dixie Hwy C/o Mail Boxes, Etc Suite, Apt #, etc.  4. Date incorporated or Qualified To Do Business in Florida To Do Business in Florida  5. FEI Number 65-0777007 6. CERTIFICATE OF STATUS DESIRED  7. Name and Address of Current Registered Agent  Name Kenneth A. Schorr  Street Address (P.O. Box Number is Not Acceptable) 6330 NW 40th Street  Suite, Apt #, Etc.  City Miami St. I. being appointed the registered agent of the above named corporation, am familiar with end accept the obligations of section 607.0505 or 617.05  Signature of REGISTERED AGENT MUST SIGN  Date  Officers and/or Directors  Name of Officers and/or Directors  Officer and/or Director  City Officers and/or Directors  Officer and/or Director  Officer and/or Director  City Officer and/or Director	679174 701=01079023
Suite, Apt. #, etc.  Suite, Apt. #, etc.  Gity & State Miami, FL  Dip  Country  33156-4438  Miami-DAde  To Do Business in Florida  To Do Business in Florida  FEI Number 65-0777007  CERTIFICATE OF STATUS DESIRED  T. Name and Address of Current Registered Agent  Name Kenneth A. Schorr  Street Address (P.O. Box Number is Not Acceptable) 6330 NW 40th Street  Suite, Apt. #, Etc.  City  Miami  L. I. being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.05  REGISTERED AGENT MUST SIGN  Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  Titles  Officers and/or Directors  City  REGISTERED AGENT MUST SIGN  Name of Officers and/or Directors  City  Registered Agent  Registered Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  Titles  Officers and/or Directors  City  City  Street Address of Each Officers and/or Directors  City  City  City  Street Address of Each Officers and/or Directors  City  City  Country  6. FEI Number 65-0777007  6. CERTIFICATE OF STATUS DESIRED  CERTIFICATE OF STATUS DESIRED  Agent  FL  State  331  State  Agent  FL  State  Country	750.00 ****750.0
Miami, FL  Miami, FL  Country  33156-4438 Miami-DAde 33156-4438 Miami, Dade  7. Name and Address of Current Registered Agent  Name  Kenneth A. Schorr  Street Address (P.O. Box Number is Not Acceptable) 6330 NW 40th Street  Suite, Apt. #, Etc.  City  Miami  Street Address descriptions of section 607.0505 or 617.05  Signature of Registered Agent  REGISTERED AGENT MUST SIGN  Name and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  Name of Officers and/or Directors  Name of Officers and/or Director City  Name of Officers and/or Director City  Street Address of Each Officer and/or Director City  City  Street Address of Each Officer and/or Director City  City  Street Address of Each Officer and/or Director City  City  Street Address of Each Officer and/or Director City  City  City  Street Address of Each Officer and/or Director City  Cit	8/18/97
33156-4438 Miami-DAde 33156-4438 Miami, Dade CERTIFICATE OF STATUS DESIRED  7. Name and Address of Current Registered Agent  Name Kenneth A. Schorr  Street Address (P.O. Box Number is Not Acceptable) 6330 NW 40th Street  Suite, Apt. #, Etc.  City Miami State  Titles  Name of Officers and/or Directors  Name of Officers and/or Director  Name of Officers and/or Director  Street Address of Each Officer and/or Director  Street Address of Each Officer and/or Director  City State  Titles  Name of Officers and/or Directors  Street Address of Each Officer and/or Director  City Street Address of Each Officer and/or Director  City Street Address of Each Officer and/or Director  City Street Address of Each Officer and/or Director	Applied For Not Applicable
Titles  7. Name and Address of Current Registered Agent  Name Kenneth A. Schorr  Street Address (P.O. Box Number is Not Acceptable) 6330 NW 40th Street Suite, Apt. #, Etc.  City Miami  State City Miami  REGISTERED AGENT MUST SIGN  Name and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)  Name of Officers and/or Directors  City  Registered Agent  Name of Officer and/or Director  City  State  State  Agent  State  Agent  State  Agent  State  Agent  State  State  Agent  State  State  City  State  State  State  State  Agent  State  State  City  State  Agent  City	S8.75 Additional Fee requir
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Titles Name of Street Address of Each Officers and/or Directors Officer and/or Director Ci	· ,
Officers and/or Directors Officer and/or Director	
VST Edward M. Schorr. 6330 NW 40th Street Miami, FL	ity / State / Zip
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Q. 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 this reinstalement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 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), on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.	r 617.0401, F.S., that all fees