PLEASE READ	ALL INSTRUCTIONS	BEFORE C	COMPLETING THIS FORM. And
APPLICATION APPLICATION	PARTMEN	NT OF STATE	
FOR	Secretary of S		FILED
REINSTATEMENT	DIVISION OF CORPOR		
DOCUMENT # <b>P97000078377</b>			98 NOV 25 PM 2: 16
1. Corporation Name			SECRETARY OF STATE TALLAHASSEE, FLORIDA
ONE SHARE STOCK EXCHAN	GE, INC.		TOLESTIA OCIE, FLORIDA
Principal Place of Business Mailing Address			
7280 W. PALMETTO PARK RD., STE. 110 7280 W. PALMETTO PARK RD., STE. 110 800CA RATON FL 33433 800CA RATON FL 33433		E. 110	
If above addresses are incorrect in any way, line thro			
2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 5.18 ADAMS 5.1.		Applicable ST	Date Incorporated or Qualified     To Do Business In Florida     09/09/1997
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. FEI Number Applied For
Hollywood FL	Hollywood) 1	CL.	6. Not Applicable \$8.75 Additional Fee required
33020 USA	Zip 33020 Country	' $u$ S $A$	CERTIFICATE OF STATUS DESIRED for a Certificate of Status
Names and Street Addresses of Each Officer and/     Name of Officers		tions must list at lea	
Title(s) and/or Directors	l Offi	icer and/or Director Post Office Box Nu	City / State / Zip
PRESIDENT SUSAN McCEANOR	-Williams 1518 ADA	NC ST	Hollywood, Fl 33020
	13 10 17 DA	145 -21 1	7/0/1940504, PC 33920
			2000027037421.
			*****150.00 ****150.00 •
•			
8. Name and Address of Current F	Registered Agent	<u> </u>	9. Name and Address of New Registered Agent
		Name Susa	1) M. Conner - W. Hinnes
HARRIS, MICHAELD		Street Address (P.O. Box Number is Not Acceptable)  Suite And # Etc.	
712 US HWY. 1, STE. 400 N. PALM BEACH FL 33408	:	Suite, Apt. #, Etc.	71371115
~		City How the	1 WOOD   State   Zip Code   FL   33020
10. I, being appointed the registered agent of the abo	ve named corporation, am familiar wil	th and accept the ob	oligations of Section 607.0505, F.S.
Signature of Registered Agent RE	EGISTERED AGENT MUST SIGN	<u>UBFD</u>	Date
11. This corporation owes or has paid 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 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day Imperior # Day			





November 23, 1998

Divisions of Corporations Annual Report/Reinstatement Section P O Box 6327 Tallahassee, FL 32314

RE: One Share Stock Exchange, Inc / Document # P97000078377

Dear Sir or Madam:

Due to the corporation's address change and reorganization of structure, the 1998 annual report for the Florida Department of State was never received by this office.

I have indicated a change of address and registered agent on the enclosed form. Kindly make the appropriate changes for future mailings.

Enclosed please find our check numbered 1018 in the amount of \$150.00 for 1998 Annual Report Fee and Corporate Supplemental Fee.

Thank you for your understanding and attention in this regard.

Sincerely yours,

Susan McCranor-Williams

President