

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT  
 FLORIDA DEPARTMENT OF STATE  
 Jim Smith  
 Secretary of State  
 DIVISION OF CORPORATIONS

FILED

02 NOV -5 AM 9:05

DOCUMENT # P98000055951

1. Corporation Name  
 ESTATE & RETIREMENT CONSULTANTS INC.

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
~~80 SW 8TH STREET STE 2000 MIAMI FL 33130~~ 1170 99 ST #4 BAY HARBOR ISL. FL. 33154  
 1170 99 STREET APT 4 BAY HARBOR ISLANDS FL 33154



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable  
 1170 99 ST #4 BAY HARBOR ISLANDS FL 33154  
 Suite, Apt. #, etc. 4

3. New Mailing Office Address, If Applicable  
 1170 99 ST #4 BAY HARBOR ISLANDS FL 33154  
 Suite, Apt. #, etc. 4

4. Date Incorporated or Qualified To Do Business in Florida 06/23/1998

5. FEI Number 65-0845146 Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status

City & State BAY HARBOR ISLANDS FL BAY HARBOR ISLANDS FL  
 Zip 33154 Country USA Zip 33154 Country USA

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	BAROUK, BARRY	1170 99TH STREET APT 4	BAY ISLANDS ISLANDS FL 33154

8. Name and Address of Current Registered Agent  
 BAROUK, BARRY  
~~PO BOX 174 D02~~  
 1170 99 STREET #4  
 BAY HARBOR ISLANDS FL 33154

9. Name and Address of New Registered Agent  
 Name BARRY BAROUK  
 Street Address (P.O. Box Number is Not Acceptable) 1170 99 ST  
 Suite, Apt. #, Etc. 4  
 City BAY HARBOR ISLANDS State FL Zip Code 33154

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of Registered Agent \_\_\_\_\_ REGISTERED AGENT MUST SIGN \_\_\_\_\_  
 Date 10-31-02

11. 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 REQUIRED  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
 Date 10-31-02 Daytime Phone # 305-889-8824

CR2E040 (8/02)

11/01/02

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL. 32314

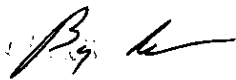
Subject: Estate & Retirement Consultants, Inc. #P98000055951, FEI # 65-10845146

To Whom it May Concern:

I never received the Uniform Business Report bill for the prior year.(2002) Please—  
indicate new registered agent as Barry Barouk, 1170 99 Street #4, Bay Harbor Islands,  
FL. 33154. (at correct address) That P.O. Box was never mine) Also, I previously sent a  
letter to change my address from 80 S.W. 8<sup>th</sup> St Ste200 to current address of 1170 , 99  
Street #4, Bay Harbor Islands, Fl. 33154

Enclosed please find check for \$150.00 to reinstate Corporation due to non receipt of  
prior Uniform Business Report.

Thank You!

  
Barry Barouk