APPROVED
AND
FILED

99 OCT 26 AM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000056271

1. Corporation Name

COMPREHENSIVE HOLDINGS, INC

Principal Place of Business | Mailing Address

REINSTATEMENT 99

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

2. New Principal Office Address, If Applicable	3. New Mailing Office Address, If Applicable
Suite, Apt. #, etc. 934 N. UNIV DR #158	Suite, Apt. #, etc. 934 N. UNIV DR #158
City & State CORAL SPRINGS FLA	City & State CORAL SPRINGS FLA
Zip 33071 Country USA	Zip 33071 Country USA

4. Date Incorporated or Qualified To Do Business in Florida: 6/23/98

5. FEI Number: 65-0948178 — Applied For ☐ Not Applicable ☐ SP

6. CERTIFICATE OF STATUS DESIRED ☐

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PRES	ALLEN GELMAN	934 N UNIV DR	CORAL SPRINGS FLA 330
SEC	BARRY KAPLAN	934N UNIV DR. CORAL SPRINGS	FLORIDA 33071

400003025874--9

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301	Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City — State FL — Zip Code

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.

Signature of Registered Agent: Laura R Dunf — Date

REGISTERED AGENT MUST SIGN

11. This corporation owes 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 of the reactor 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: BARRY KAPLAN — Date: 10/25/99 — Daytime Phone: 954/257/5599

OCT. -25. 99 (MON) 15:12 CSC TALL P.002

(2)

THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 433514 4798A

AUTHORIZATION : Patricia Pizzuto

COST LIMIT : $ 758.75

ORDER DATE : October 26, 1999

ORDER TIME : 2:38 PM

ORDER NO. : 433514-005

CUSTOMER NO: 4798A

CUSTOMER: Barry J. Kaplan, Esq
Kaplan & Henschel
Suite 158
934 N. University Drive
Coral Springs, FL 33071

DOMESTIC FILINGS

NAME: COMPREHENSIVE HOLDINGS, INC.

XX___ REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX_____ PLAIN STAMPED COPY
XX_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Tamara Odom

EXAMINER'S INITIALS _____

FILED
99 OCT 26 PM 4:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA