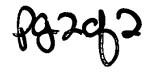
		PLEASE READ A	ALL INST	RUCTION	IS BEFORE	COMPLET	ring this Con C	12	
API	LICAT	ION		DERABEME			10	V.	
PEWSTATEMENT DIVI				Society of State		FILED			
DOCUMENT # P98000057271						00 NOV -2 AM 9: 38			
Corporation Name						SECKETARY OF STATE TALLAHASSEE, FEORIDA			
		STMENT GROUP							
				lailing Address 715 STH ST				•	
	BEACE	H, FL	MIAMI BEACH, FL					00	
33139 33139								SP	
If above addresses are incorrect in any way, line through incorrect information and 2. New Principal Office Address, if Applicable 3. New Mailing Office Address							orated or Qualified ess in Florida 6/25/98		
Suite, Apt. #, etc. Suite				uite, Apt.#, etc.		5. FEI Number		Applied For	
City & State			City & State			65 0848702 Not Applicable 6. SB/35 Additional Fee required		1	
Zip Country		Zip Count		ntry			ertificate of Status		
7. Names	and Street A	Addresses of Each Officer a	nd/or Director (F	lorida nonprofit d	corporations must list Street Address of Eac	at least 3 director	s)		
Title(s) 1	2	Name of Officers and/or Directors	<u> </u>	}	Officer and/or Directo Use Post Office Box	or	City / State / Zip		
PD	D HORST ORTNER			715 5TH ST			MIAMI BEACH, F	L 33139	
VPDS TC	DANIE	L_ROUSSEAU_	715 5TH ST		ı ST		MIAMI BEACH,	FL 33139	
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			<u> </u>			•			
	<u> </u>			·					
		e and Address of Current	Registered Age	ent	Name -	9. Name and A	Address of New Registered Agen	7.000	
						Address (P.O. Roy Number is Not Acceptable)			
10001 NW 50TH STREET STE 204						CP			
SUNRISE, FL 33351						State Zin Code			
10. I, bein	g appointed t	he registered agent of the a	bove named do	rporation, am fam	illiar with and accept t	the obligations of			
Signature of Registered Agent REGISTERED AGENT MUST SIGN									
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No X (See other side for information on intangible tax.)									
filing t	his reinstater I fees owed t ation indicate	ment application, the reason	for dissolution I	has been elimina ames of individua	ted, the corporate nar ils listed on this form	me satisties the re do not qualify for a		[0][.040], F.S.,	

STF FL32474F.1



ALAN N. RAZLA, PA



(954) 983 - 9394 Broward (954) 292 - 9246 Broward (954) 983 - 6799 Fax

Florida Office

Alan N. Razla, PA Tax Advisor 3218 Stirling Road Hollywood, FL 33021 Email: wwwcpa@netzero.com

NHSCPA Member AICPA Member New Hamp. Office

Alan N. Razla , PA Certified Public Account 26 South Main Street Suite Concord, NH 03301

В"Н

21-pie-2000

FI Div of Corporation PO BOX 6327 Tallahassee, FL 32314

Attn.: Annual Reports section RE: reinstatement Doc no. P98000057271 K - H INVESTMENT GROUP INC.

Dear Sir or Madam:

Enclosed is an application for reinstatement-for K H investment group: Please-be advised that myclient, their attorney or our office did not receive their annual report (pre-printed form). This form was recreated by our office. We ask you to please accept the \$300 check for the 2000 and 1999 annual report and waive all penalties that resulted from this confusion.

I thank you in advance.

Alan N. Razla Alan N. Razla, PA