


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED 99 DEC -1 AM 8:55 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
DOCUMENT # <u>998000088653</u>					
1. Corporation Name A BETTER HANGER COMPANY, INC.					
Principal Place of Business 6034 Chester Avenue, No. 208 Jacksonville, FL 32217			Mailing Address 6034 Chester Avenue, No. 208 Jacksonville, FL 32217		
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Office Address, If Applicable Suite, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida 10/16/98 5. FEI Number <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> SB 75: A number of fees required for a Certificate of Status	
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 (Do NOT Use Post Office Box Numbers)	City / State / Zip		
P	Roy Farrell	6034 Chester Avenue No. 208	Jacksonville, FL 32217		
VP	Joseph E. Miller	Same			
Sec	Arthur F. Taylor	Same			
T					
8. Name and Address of Current Registered Agent Joseph E. Miller 6034 Chester Avenue, No. 208 Jacksonville, FL 32217			9. Name and Address of New Registered Agent Name N/A Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code FL		
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 <u><i>Joseph E. Miller</i></u> Date 11-29-99 REGISTERED AGENT MUST SIGN					
11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (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: <u><i>Roy Farrell</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Roy Farrell, President			Date 11/29/99 Daytime Phone # KE		

CPS/001 (12/98)