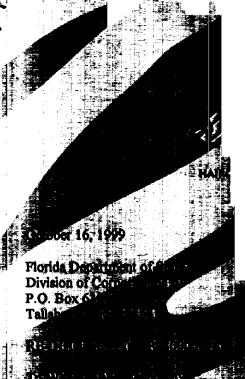
•	BL AST TA	ALL AIST	CTION	S REFORE (COMPLET	ING THIS FORM.
, AP	PLICAT ON FOR	FAR		ENT OF STATE		
REINSTATEMENT DIVISION OF CORPORATIONS						FILED
DOCUMENT # P98000097858						99 NOV 10 PM 5: 06
1. Corporation Name KIDS JUNGLE KUTS, INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business Mailing Address						THE PLURIUM
6931 RED ROAD 6931 RED						
If above addresses are incorrect in any way, line through incorrect information and enter corr						
			New Mailing Office Address, If Applicable			orated or Qualified ness in Florida
Suite, Apt			Suite, Apt. #, etc.		5. FEI Numbe	11/20/1998 Applied For
City & State		City & State			6. S875 Additional Fee required	
Zip	Country	Zip	Cou		<u> </u>	E OF STATUS DESIRED 50 13 Admitional Fee required for a Certificate of Status
	nes and Street Addresses of Each Officer and/or Director (Floring Name of Officers		Street Address of Each		h	
Title(s)	le(s) and/or Directors		Officer and/or Director		· · · · · · · · · · · · · · · · · · ·	City / State / Zip
DP	DP ROSENBLATT, BRAD			IS AVE. #1104		BAL HARBOUR FL 33154
DV	DV ROTLEWICZ, URI			IS AVE. #1104		BAL HARBOUR FL 33154
DST	KREPS, DAVID		5222 NORTH BAY ROAD			MIAMI BEACH FL 33139
ļ						000030522587
						-11/23/9901004018 ****158.75. ****158.75
	Name of Addition of Comments	4 Damintana d Am	<u> </u>		0 41	
Name and Address of Current Registered Agent Name					9. Name and Address of New Registered Agent	
					P.O. Box Number	is Not Acceptable)
6931 RED ROAD CORAL GABLES FL 33143 Suite, Apt. #, E).	OBGS
City					State Zip Code	
10. I, bein	g appointed the registered agent of the a	bove named corp	oration, am familia	r with and accept the o	obligations of Sect	
Signature of Registered Agent						
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.						
elest a	TUDE RUMAN	WO	Don	- Brezin		194199 305-240-5830
SIGNATURE: DAL WUCCE BRAD ROSEURLATT 196199 305-740-5830						



to reinstate. If son shock your feel free to comfact me sets

Sincerely.

