

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Natalie B. Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000099533

1. Corporation Name

PROGRESSIVE GRAPHICS, INC.

Principal Place of Business

11000 LA SALINAS CIRCLE
BOCA RATON F; 33428
9812 S. Military Trail, #KA
Boynton Beach, FL 33436

Mailing Address

11000 LA SALINAS CIRCLE
BOCA RATON F; 33428

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

2. New Principal Office Address, If Applicable

9812 S. Military Trail
#KA

3. New Mailing Office Address, If Applicable

9812 S. Military Trail
#KA

Suite, Apt. #, etc.

City & State
Boynton Beach, FL

Zip
33436

Country
USA

Suite, Apt. #, etc.

City & State
Boynton Beach, FL

Zip
33436

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida

11/30/1998

5. FEI Number

65-0877874

Applied For
Not Applicable

6.

CERTIFICATE OF STATUS DESIRED \$8.75 Additional Fee 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	City / State / Zip
1	2	3	4
PTD	SPIEZZO, MICHAEL A	11000 LA SALINAS CIRCLE	BOCA RATON F; 33428
S	SPIEZZO, EVELYN R	11000 LA SALINAS CIRCLE	BOCA RATON F; 33428
			280003045982-8 -11/16/99-01079-012 ****158.75 ****158.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

AMERICAWORKER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

Name

Signature

Street Address (P.O. Box Number is Not Acceptable)

11000 La Salinas Circle

Suite, Apt. #, Etc.

City

State

Zip Code

FL 33428

CR2E40 (898)

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

Lynn R. Spazio

REGISTERED AGENT MUST SIGN

Date

10/28/99

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:

R. Lynn Spazio

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-28-99

Date

561-736-1022

Daytime Phone #

Family Owned & Operated
Since 1984

PHONE 561.736.1022
FAX 561.736.9852



Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Dear Sir/Madam,

Please find the enclosed reinstatement form for Progressive Graphics, Inc., dba American Speedy Printing. This corporation was established on 11/30/98. Recently I received a notice that my corporation was dissolved in less than a year of operation with no prior notices. I was under the understanding that I would have to fill out an annual report every year which I thought was to be completed before my anniversary date. My registered agent did not notify me of any deadlines. I apologize for any inconvenience this may have caused, but this was the first year of operation for my new business. Please waive any late charges.

After contacting your office in Tallahassee, I was advised to return the attached application for reinstatement along with the original filing fee of \$150.00 and \$8.75 for a Certificate of Status.

Sincerely,

A handwritten signature in black ink. The signature appears to read "Michael A. Spiezio".

Michael A. Spiezio
President