PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION FLORIDA DEPARTMENT OF STATI						·	
KENATAIENENI. WERSONES			ocretary of State		FILED SECRETARY OF STATE		
2000 th	ru 2006	DIVIS	ON OF CORPORATIONS	1	DIVISION OF CORPO	RATIONS	
DOCUMENT # P99000070975 1. Corporation Name					06 NOV -2 PM 2: 01		
ar Corperation							
HUM	iphrey traff.	IC SERVICES, INC					
2. Principal Office Address 3. Meilin			ce Address	PENS	tatenent	00-66	
4481 STIRLING ROAD		P.O. BO	P.O. BOX 799		CR2E081 (12/05)		
Suite, Api. #, ek	c	Suite, Apt. #, a	C.				
01 4 01					4. Date incorporated or Qualified To Do Business in Florida 8/04/1999		
City & State FORT T.Att	DERDALE, FL	City & State	LITHIA, FLORIDA		5. FEI Number Applied For		
Zip Country		Zip			59-3592910 Not Applicable		
33314 USA 3		SA 33547	USA	CERTIFICATE OF STATUS DESIREO 59.75 Additional Fee required for a Conditional of Status			
-		7. Na	me and Address of Current Regi	stered Agent			
!	Name PHYL:	LIS D. HUMPHREY					
- 3	Street Address (P.O. Bo	x Number is Not Acceptable)					
	4481 Suite, Apt. #, Etc	STIRLING ROAD					
		<u> </u>					
(City FORT	LAUDERDALE			State Zip Code 33314		
8. I, being app	pointed the registered a	pent of the above named corpor	ation, am famillar with and accept th	ne obligations of section	on 607.0505 or 617 0503, F.S.		
Signature of Registered Age	In The	Mrs () Atal	sekent		Date 11 01	2004	
Vadiates võs		REGISTERED AGE	NT MUST/SIGN		Darie	2000	
9. Names an	d Street Addresses of E	ach Officer and/or Director (Flor	da nonprofit corporations must list o	at lesst 3 directors)			
Titles	Name of Officers and/or Directors		Street Address of Each Officer and/or Director		City / State / Zlp		
P	PHYLLIS D. HUMPHREY		4481 STIRLING ROAD		FT.LAUDERDALE, FL 33314		
				5 11/	000815239 18/0601023021	595 **1050.00	
			-				
					·····		
this rainsti owed by li	etement application, tha he corporation have bee	meson for dissolution has been in gala and the names of individu	powered to execute this application eliminated, the corporate name salt ials listed on this form do not qualify to the same legal effect as if made to	aftes the requirements for an exemption con	of section 607.0491 of 617.0401	l, F.S., ther all fees	
SIGNATU			KESLDENT HUMA	the	11/01/20	20b	
l	SIGNATURE AN	D TYPED OR PRINTED NAME OF S	igning officer or director		Dete E Daytim	e Phone II	

TO: DIVISION OF CORPORATION P.O. BOX 6327 TALLAHASSEE, FL 32314

TO WHOM IT MAY CONCERN:

AS PER YOUR INSTRUCTIONS, ENCLOSED YOU WILL FIND THE ANNUAL REPORT FORM ALONG WITH A CHECK PAYABLE TO THE FLORIDA DEPARTMENT OF STATE TO PROPERLY UP-DATE THE ABOVE MENTIONED CORPORATION.

I NEVER RECEIVED THE ANNUAL REPORT NOTICE FOR THE YEARS OF 2000, 2001, 2002, 2003, 2004, 2005, AND 2006 FROM YOUR OFFICE TO PAY THE ANNUAL FEE. PLEASE TAKE THIS LETTER AS AN EXCUSE TO PUT THIS COMPANY IN ITS CURRENT STATUS AND WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS MATTER AND IF YOU SHOULD HAVE ANY QUESTION REGARDING THIS LETTER DON'T HESITATE TO CONTACT ME.

CORDIALLY,

PHYLLIS D. HUMPHREY

PRESIDENT