

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P99000071623

1. Corporation Name

Pheonix Investment Management, Inc.

2. Principal Office Address

2400 East Commerical Blvd.

3. Mailing Office Address

2400 E. Commercial Blvd.

Suite, Apt. #, etc.

Suite 719

Suite, Apt. #, etc.

Suite 719

City & State

Ft. Lauderdale, Florida

City & State

Ft. Lauderdale, Florida

Zip

33308

Country

U.S.A.

Zip

33308

Country

U.S.A.

4. Date Incorporated or Qualified
To Do Business in Florida

08-11-99

5. FEI Number

65-0940462

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Michael Burnick

Street Address (P.O. Box Number is Not Acceptable)
2400 East Commercial Blvd.

Suite, Apt. #, Etc.

Suite 719

City

Ft. Lauderdale

State

FL

Zip Code

33308

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of

Registered Agent

Date

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D, P	Michael Burnick	2400 East Commercial Blvd.	Ft. Lauderdale, FL 33308

10. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Michael Burnick, President

11/15/01 (954) 489-4797

CR2E081 (9/00)

PHEONIX INVESTMENT MANAGEMENT, INC.
2400 East Commercial Blvd., Suite 719
Fort Lauderdale, Florida 33308

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Department of State
Division of Corporations
Attn: Corporation Reinstatement
P.O. Box 6327
Tallahassee, Florida 32314

RE: Pheonix Investment Management, Inc. (the "Corporation")
Document No.: P99000071623

Dear Sir or Madam:

Please accept and file the enclosed executed Corporation Reinstatement form for the above-referenced Corporation. The 2001 Uniform Business Report rejection letter or any other correspondence from the Secretary of State was not received at the Corporation's principal/mailling address; therefore, please waive the reinstatement fee and costs.

Should you have any questions regarding the enclosed, please do not hesitate to contact me at the following number (954) 489-4797.

Thank you in advance for your assistance.

Very truly yours,



Michael Burnick, President