PLEASE REA	DALL INST	RUCTIONS BEFORE	COMPLETIN	5 11 110 1 O NW.		
CORPORATION REINSTATEMENT	S	DEPARTMENT OF STATE Secretary of State SION OF CORPORATIONS		ILED 6 AM 10: 35		
DOCUMENT # P99 0000 83057 1. Corporation Name				SECRETARY OF STATE TALLAHASSEE. FLORIDA		
AMERICAN GENERI WEST FLA. INC	AL Consti	Ruction of				
2. Principal Office Address 7602 157	St. E. SALASSTA, Fla. SA. te, Apt. #, etc. Suite, Apt. #, e SA.		DELICOTATE DO			
Suite, Apt. #, etc.			4. Date Incorpora To Do Busines	4. Date Incorporated or Qualified To Do Business in Florida Sept. 14, 1999		
City & State SARASOTA Fla. Zip Country		Country	ء ا	FEI Number 65-0956009 Applied For Not Applied CERTIFICATE OF STATUS DESIRED 88.75 Additional Fee require for a Certificate of States		
34243 USA	SI	AME USA	CERTIFICATE OF	STATUS DESIRED L for a Ce	ertificate of Stat	
Name DONN R Street Address (P.O. Box Number Suite, Apt. #, Etc. City BRADE	MYER (Name and Address of Current Reg	2000: 10/09/03 P _{VE} , W.	23669932 11065012 **750 State Zip Code FL 34210	108	
8. I, being appointed the registered agent of the Signature of Registered Agent	REGISTERED AG	GENT MUST SIGN		607.0505 or 817.0503, F.S. Date <u>09-29-</u>	03	
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at Name of Street Address of Each Officer and/or Director (Florida nonprofit corporations must list at			f Each	City / State / Zi	ip	
Titles Officers and/or Din	Titles Officers and/or Directors		irector			
Mres. DONN K. M.	E RICHARD T. MORGAN		- W-	BRADENTON,	F1.342/0	
Vice Richard T. M	PORGAN	3820 59th AVE 1209 CARMELL	A LANE	SARASOTA,	<u> </u>	
10. I certify that I am an officer or director or the this reinstatement application, the reason owed by the corporation have been paid a on this application is true and accurate, an SIGNATURE:	or dissolution has been nd the names of indivi d my signature shall h	iduals listed on this form do not qual	ify for an exemption unde e under oath.	r section 119.07(3)(i), F.S. The inf	fy that when filing F.S., that all fees formation indicate	

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