## APPLICATION FOR-



## FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

**DIVISION OF CORPORATIONS** 

## P99000109834 DOCUMENT #

1. Corporation Name

WIN-DEALER TV, IN	IC
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Principal Place of Business

6600 SW 57 AVENUE

SUITE 300 **MIAMI FL 33143**  Mailing Address

6600 SW 57 AVENUE SUITE 300 MIAM! FL 33143

FILED

02 APR 15 PM 2:53

SECRETARY OF STATE TALLAHASSEE, FLORIDA

If above addresse	s are incorrect in any way, line	through incorrect information and enter correction below.			
New Principal Office Address, If Applicable  Suite, Apt. #, etc.  City & State		3. New Mailing Office Address, If Applicable	Date Incorporated or Qualified     To Do Business in Florida	12/13/1999	
		Suite, Apt. #, etc.			
		City & State	5. FEI Number APPLIED FOR	Applied For	
			AIT LILL TOIL	Not Applicable	
Zip	Country	Zip Country	<b>–</b> 1 °·	\$8.75 Additional Fee required	

		CERTIFICAT	E OF STATUS DESIRED	for a Certificate of Status	ŝ
. Names a	and Street Addresses of Each Officer and/or Director (Flo	rida 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	_

Title(s)	2 and/or Directors	3 Officer and/or Director	City / State / Zip
CEO	ABRAHAM, THOMAS G	6600 SW 57 AVENUE	MIAMI FL 33143
•			000053504471 -04/26/02-01011031
***			****150.00 ****150.00
			7000053504471

\*\*\*\*150.00 \*\*\*\*150.00 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent

Name

C T CORPORATION SYSTEM 1200 S PINE ISLAND RD PLANTATION FL 33324

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

Suite, Apt. #, Etc.

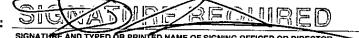
State Zip Code

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.

ANNE BOUTILIER

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:



4-11-02 305-666-8020

Date Daytime Phone #

WIN-DEALER TV, INC.

6600 SW 57 Avenue, Suite 300 Miami, FL 33143 Phone: (305) 666-8020

Fax: (305) 666-8050

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April 10, 2002

Query O

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

Dear Secretary of State:

WIN-DEALER TV, INC. has been in business since December 1999 and filing its annual Uniform Business Report. Unfortunately last year, the form for the 2001 Uniform Business was never received, misplaced or lost in the move to our new offices. We greatly apologize for this inconvenience.

As WIN-DEALER TV, INC. wishes to remain a company in good standing in Florida, please accept our check in advance of the May 1<sup>st</sup> filing deadline in the amount of the \$150.00 yearly filing fee for the year 2002.

We look forward to working with you. In the meantime, if I can be of further assistance, please do not hesitate to contact me.

Sincerely,

Thomas G. Abraham Director

Enclosures