APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT Sandra B. Morth Secretary of Sta	OF STATE am te		ALED	
	OCUMENT # s35685			98 DEC 21 PM 3: 29	
1. Corporation Name			SECTION OF STATE TALL/HASSEE, FLORIDA		
Morgenstern International, Inc.					
Principal Place of Business 2200 Corporate Blvd. NW	200 Corporate Blvd. NW 1 So. Ocean Blvd. Rm 212				
Suite 308 Boca Raton, FL 33431 Boca Raton, FL 33132					
If above addresses are incorrect in any way, line through incorrect information and enter correction below.					
2. New Principal Office Address, If Applicable 2200 Corporate Blvd. NW Suite, Apt. #, etc.	3. New Mailing Office Address, If Applicable 2200 Corporate Blvd. NW Suite, Apt. #, etc.		Date Incorporated or Qualified To Do Business in Florida 3/5/91		
Suite 308	Suite 308 City & State		5. FEI Number Applied For 65 – 0252605		
City & State Boca Raton, FL	Boca Raton, FL		6.	140t Applicable	
Zip Country 33431 USA	Zip Country 33431 USA		CERTIFICATE	OF STATUS DESIRED (\$8.75 Additional Fee required for a Certificate of Status	
7. Names and Street Addresses of Each Officer and/o		ns must list at leas Address of Each	t 3 directors)		
Title(s) and/or Directors Officer and/or Director 3 (Do NOT Use Post Office Box Numbers) 4				City / State / Zip	
PD Richard L. Morgenstern 2200 Corporate Blvd. NW BocacRaton, FL 33431					
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INSTATEMENT 97-98					
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8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent					
Stephen F. Beiner Name Kichar				pogenstern	
Nations Bank Building 2000 Glades Road, Suite 110 Street Address (P.O. Box Number is No 2000 (or por a ty				te Klud VW_	
Boca Raton, FL 33431					
City Soca Raton State Zip Code FL 33431					
10. I, being appointed the registered agent of the above named emporation, am familiar with and accept the obligations of Section 607.0505, F.S.					
Signature of Date 17/18/98 REGISTERED AGENT MUST SIGN					
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No U (See other side for information on intangible tax.)					
12. 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 #					
Richard L. Morgenstein, Pres.					