FOR REINSTATEMENT				DA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		9	4 FILE	D		
DOCUMENT # V02726 L. Corporation Name							*	99 NOV -8 PH 3: 04		
EACH	H COMM	UNITIES	II, INC.				100	SECTION IN TALLAMASSIM	of State , Florida	
rincipal Place of Business Mailing Ad				ress						
. =				1350 GULF : CLEARWATE	JLF BLVD. Pater fl 34630			iii ii		
If all the are threases are incurrect in any way, line through incorrect in						nformation and enter correction below.		REINSTATEMENT 98-99		
					-	эчгөээ, н мүүнсавге	Date Incorporated or Qualified To Do Business in Florida 12/27/1991			
				City & State	uite, Apt. #, etc.			5. FEI Number Applied For		
			Zip & State			6. CERTIFICATE	59-3097504 E OF STATUS DESIRED \$8	Not Applicabl 75 Additional Fee require for a Certificate of Status		
Names a	and Street Add	resses of Each	o Officer and/o	r Director (Flo	orida nonprof	t corporations must list at lea	ast 3 directors)		To a certificate of status	
fitle(s)	2	Name of Officers and/or Directors			Officer and/or Director	Street Address of Each Officer and/or Director Use Post Office Box Numbers) 4 City / State / Zip				
PTSV	JOHNSON,	OHNSON, GLEN R				GUIF BIVE	٥.	INDIAN ROCKS FL 837	5 LL34 630	
	JOHNSON,	JOHNSON, GLEN R				scur BIV	4 ,	WOWN ROOKS FL 22785 CIGAR WATER R. 3463		
							90	0003053: -11/23/930 *****900.00	3997 1069022 *****900.00	
					<u> </u>		90	0003053:	3997	
								-11/23/990 ******8.75	1069023 *****8.75	
	8. Name	and Address	of Current Re	gistered Ag	ent		9. Name and A	Address of New Registered		
IO: PI	· · · · = =				r	Name				
JOHNSON, GLEN R J350 GUIFBLV10						Street Address (F	Street Address (P.O. Box Number is Not Acceptable)			
CLEAR WATER, FL.34630						Suite, Apt. #, Etc.				
		•				City amiliar with and accept the ot	bligations of Costi	State FL	Zip Code	
g dans d gestere l	A jent _	ten R	toku	WW/				Date		
			es or ha Property				No 🂢	(See other sic on intal	de for information ngible tax.)	
this rein: owed by	statement appl the corporation	ication, the rea in have been p	ison for dissolution and and the na	ition has beer mes of individ	i eliminated, iuals listed o	the corporate name satisfies	the requirements an exemption und	pter 607 or 617, F.S. I further of section 607.0401 or 617.0 der section 119.07(3)(i), F.S.	401 F.S. Ihat all fees	
IGNAT	rure:	Hea K	Mm	AM	SICAPUS ST	ICER OR DIRECTOR	11	1999 (127)581-00	
	814			LE MARKE UF	SIGNING OFF	OUR DIRECTOR		Date	ayunge Phone #	