▲ Tear Here ▲ ▲ Tear Here ▲ ▲ Tear Here ▲

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
DO NOT WRITE IN THIS SPACE
97 DEC 19 PM 12:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

◄ Read Instructions on Other Side Before Making Entries ►
Make Check Payable To: *Department of State*

1. Name and Mailing Address of Corporation: DOCUMENT # V13592

LAUREN SIERRA HOLDING CORPORATION
1730 South Military Trail
West Palm Beach, FL 33415

2. If Address in Block 1 is incorrect in any way, enter the correct address below. The NAME of the corporation can be changed only by filing an amendment.

Address: c/o Daryl B. Cramer, P.A.
Address: 515 North Flagler Drive, Suite 910
City and State: West Palm Beach, Florida
Zip Code: 33401-4325

3. Date Incorporated or Qualified To Do Business in Florida	4. FEI Number	FEI Number Applied For / FEI Number Not Applicable	5. $8.75 Additional Fee required for a Certificate of Status / CERTIFICATE OF STATUS DESIRED [xx]
2/12/92	65-0313932		

6. Names and Street Addresses of Each Officer and/or Director

1 Title	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City and State
P,S,T,D	GARRISON BANKS	1730 S. Military Trail	West Palm Beach, Florida

700100238898?--4
-12/29/97--01002--007
****923.75 ****923.75

REINSTATEMENT 9e 12/19/97

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

GARRISON BANKS
1730 S. Military Trail
West Palm Beach, FL 33415

8. Name and Address of New Registered Agent and/or Office

Name: Daryl B. Cramer, P.A.
Street Address (Do NOT Use P.O. Box Number): 515 North Flagler Drive, Suite 910
Street Address (Do NOT Use P.O. Box Number):
City and State: West Palm Beach, FL. Zip: 33401

9. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent By: Daryl B. Cramer, its President, Registered Agent (REGISTERED AGENT MUST SIGN) Date 12/16/97

10. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box [ ] (See other side for additional information.)

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes [ ] No [x] (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., and that all fees owed by the corporation have been paid. 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 of Officer or Director Date 12-16-97 Daytime Phone # 561-965-5727

Typed or printed name of signing officer or director GARRISON BANKS

CR2E045(2/92)