		,				
				and any other property	ING THIS FORM.	
APPLICATION FLORIDA DEPARTME						
FOR Sandra B. Mo Secretary of DIVISION OF CORPO					FLED	
				96 1	10V -4 AM 10: 21	
DOCUMENT # 1/2L/G/A					14. The second of the second o	
1. Corporation Name				SE!	Cretary of State Lahassee, Florida	
Here Wee Go	<i>∽\</i> ∞	cosuice,	certes.	ہ۔۔۔۔ د ہوم	eathagee, recition	1
			7			
Principal Place of Business Mailing Address				┪		
10515080 Ave					0	6-
No. Landodale, FC 33068				REIN	STATEMENT	01,
100 mmosom, 10 2006						
If above addresses are incorrect in any way, line through incorrect information and enter correction beken 2. New Principal Office Address, If Applicable 3. New Mailing Address, If Applicable				4. Date Incor	DO NOT WRITE IN THIS SPACE porated or Qualified	
Suite, Apt. #, etc. Suite, Ap				To Do Bus	iness in Florida	
	· 		5. FEI Numb		Applied For	
City & State	City & State	City & State		6-C	1390239	Not Applicable
Zip Country Zip		Country		CERTIFICATE OF STATUS DESIRED 55		
7. Names and Street Addresses of Each Officer and	or Director (Flo	orlda nonprofit corpora	tions must list at fe	ast 3 directors)		
Name of Officers Street Addre Trile(s) and/or Directors Officer and/				ır	City / State / 2	lip .
1 2		se Post Office Box	Numbers)	Laudertill.	FL 3339	
Pres Barbara A. Carro			ام طور	10	COMOR HILL	, - 333
		ļ				
				2	000020012	421 01010
					****575.00 *	***575.00
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					1811-10	-Ola
8. Name and Address of Current	Registered Ag	ent	l	9. Name and	Address of New Registered Agent	- 14
Name				. ,		12/25
Barbara Carrio			Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. W, Etc.			900
PHOM TIPE	8					
NEEE IT, Witabush				City State Zip Code		
	•				FL	
10. I, being appointed the registered agent of the abo	ove named corp	oration, am familiar w	ith and accept the	ohtigations of Sec	tion 607.0505, F.S.	
Signature of Registered Agent		ועפפע	D.A	$\mathcal{Q}_{\mathcal{U}_{i}}$	Date 1019191	
n	EGISTERED AC	JENT MUST SIGN			20-7 20-20	
11. Does this corporation pay	any intan	gible tax to th	e	<u> </u>	(See other side for	Information
Dept. of Revenue under S.	199.032	, Florida Stat	utes. Yes	∐ No]	on intangible	
12. Ldo baroby partiful that the information appoint	with this tilles in	volumbority furnished	and does not quali	Li faatha ayamat		
 I do hereby certify that the information supplied lease the Division of Corporations from any liabil certify that I am an officer or director or the rece 	ity of non-comp	llance with Section 11	9.07(3)(k) in the ev	ont that the infor	mation supplied is deemed exempt for	om public access. []
this reinstatement application the reason for dis less owed by the corporation have been paid. 1	solution has be	en eliminated, the cor	porate name satisi	ies the requirem	ents of section 607,0401 or 617,040	1: F.S.: and that 레니트라다
under oath		_ ^ ~	·	S . 24		
SIGNATURE: SIGNATURE AND TYPED OR DE	Dog	SIGNING OFFICER OR	COOL,	ORM	15 MG 1954 JT 61	31-57 LO
SINGS TORE AND THEN OR PR	MILED NAME OF	HO HEDITTO DEMINDE	DIRECTOR	- Show	Date	I THORE IF