

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

APPROVED AND FILED

97 DEC 31 PM 12:48

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # V32438 (6)

1. Corporation Name
BRODCO, INC.

Principal Place of Business: **1111 KANE CONCOURSE SUITE 310 BAY HARBOR ISLANDS, FL 33154**
 Mailing Address: **1111 KANE CONCOURSE SUITE 310 BAY HARBOR ISLANDS, FL 33154-2041**

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If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04/29/92	
City & State		City & State		5. FEI Number	
Zip		Zip		65-0423681	
Country		Country		Applied For	
				Not Applicable	
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)				6. CERTIFICATE OF STATUS DESIRED	
				<input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

1 Title(s)	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 / State / Zip
D/P/S/T	GEORGE BROD	1111 KANE CONCOURSE SUITE 310	BAY HARBOR ISLANDS, FL 33154-2041

800002390028--7
 -01/05/98--01113--009
 ****758.75 ****758.75

12/12/98

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVENUE, SUITE 3000 MIAMI, FLORIDA 33131		Name: GEORGE BROD Street Address (P.O. Box Number is Not Acceptable): 1111 KANE CONCOURSE, SUITE 310 Suite, Apt. #, Etc.: SUITE 310 City: BAY HARBOR ISLANDS State: FL Zip Code: 33154-2041	
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.		Date: 12/30/97	
Signature of Registered Agent:		REGISTERED AGENT MUST SIGN	

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No

(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: **GEORGE BROD**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date: **12/30/97**
 Daytime Phone #: **305 867-7555**

CR2540 (7-2-96)