DI EASE DEAD	ALL INICTOLICTIONIC	DEEODE COMPI	ETIMO TUO FORM	
APPLICATION FOR	ALL INSTRUCTIONS FLORIDA DEPARTME Sandra B. Mo Secretary of	NT OF STATE rtham	ETING THIS FORM.	
REINSTATEMENT	DIVISION OF CORPO		FILED	
DOCUMENT # V 576		.97		
Spectrum Partre	ers, Inc.	SE TAL	CRETARY OF STATE LAHASSEE, FLORIDA	
Principal Place of Business 190 1517 NE 26th 51 + 4 Wilton Manors, 19 + 4 33305 If above addresses are incorrect in any vay, line through	Mailing Address 7 NE 5 th 5 2 r field Rch. 330 ough incorrect information and enter	J F1. 141 correction below.	NSTATEMENT 90-9	1
New Principal Office Address, If Applicable 3. New Mailing Office Address, If 1907 NE 545		Applicable 4. Date II	ncorporated or Qualified Business in Florida 8.7.92	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. FEI NL	umber Applied F	or=
City & State Zip Country	City & State Deerfield Bch Zip Countr 33441	P1. 33996.	Not Appli	equired
7. Names and Street Addresses of Each Officer and/	<u> </u>			
Title(s) Name of Officers and/or Directors 1 2) Of	eet Address of Each licer and/or Director se Post Office Box Numbers)	City / State / Zip	
Pres. David Robbins	1907 NE	5th st.	Deerfield Rch, Pl. 334	41
			4000223781:4 -07/14/9701183004 ****\$40.00 ****\$40.0	(;
imposed due to clerical error			Jb 1 a	
8. Name and Address of Current B	Doistored Area			
		Name 8	and Address of New Registered Agent	
David Robbins 1904 NE 5th St Decrheld Bch, A.		Street Address (P.O. Box Nun Suite, Apt. #, Etc.	-07/14/9701183005 *****17.50 *****17.5	765 50
10. I, being appointed the registered agent of the above	3344 (-	State FL Zip Code	
Signature of Registered Agent	SISTERED AGENT MUST SIGN	· · · · · · · · · · · · · · · · · · ·	Date 7-8-97	
11. Does this corporation pay a Dept. of Revenue under S.	ny intangible tax to th 199.032, Florida Statu	e ites. Yes \(\text{No.} \)	(See other side for information on intangible tax.)	
triis reinstatement application, the reason for dissoit	ution has been eliminated, the corpoi ames of individuals listed on this form	ate name satisfies the requirement of the not qualify for an exemption	n chapter 607 or 617, F.S. I further certify that when filin ents of section 607.0401 or 617.0401, F.S., that all fees n under section 119.07(3)(i), F.S. The information indicates	
SIGNATURE: DAVID M. ROA	BB/NS TED NAME OF SIGNING OFFICER OR D	LM Folls	7-8-97 (954) Date 875.0695	