PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION REINSTATEMENT	9	TMENT OF STATE y of State orporations	FILED 04 APR 12 AM 8: 37	
DOCUMENT # V57364			SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Sales Consultants of Ft Lauderdale, Inc.				
		,	REINSTATCHENT_	2-04
2. Principal Office Address 3. Mailing Of		ss		
3000 NE 30th Place 3000 NE		h Place	200032278222 04/09/0401056027 **358	. 75
Suite, Apt. #, etc. Suite, Apt. #,				
#408			4. Date Incorporated or Qualified To Do Business in Florida	
City & State City & State		د امرانی بیمی ایمان یویت	5. FEI Number	Applied For
Ft. Lauderdale, FL	Ft. Lauderd	ale. FL	 	Not Applicable
Zip Country	Zip	Country	6	nal,Fee required
33306 Broward	33306	Broward	CERTIFICATE OF STATUS DESIRED 🔀 50.73 Addition	cate of Status
Gregory G Peterson Street Address (P.O. Box Number is Not Acceptable) 5830 NE 21st Avenue Suite, Apt. #, Etc. City Ft. Lauderdale 8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Signature of Registered Agent REGISTERED AGENT MUST SIGN				
9. Names and Street Addresses of Each Officer a	nd/or Director (Florida nonor	ofit corporations must list a	at least 3 directors)	
Titles Name of Officers and/or Directo		Street Address of E Officer and/or Dire	Each City / State / 7in	
V/D/T Jeffrey A Taylo	or 2880	NE 14th St	reet,#303 Pompano Beach, F	ւ 33062
P Gregory G Peter	son 5830	NE 21st Ave	enue Ft. Lauderdale F	Lï-33308i
10. 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 filling 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 fleen 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: Gregory Peterson 4/7/04 (954) 772-5100 Date Daytime Phone #				
SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING OF	FICER OR DIRECTOR	Date Daytime Phone	#