PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

W96 24794

FILED
96 NOV 22 AM 10:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # V62759

1. Corporation Name

Trans Millennial Resource Corporation

Principal Place of Business

8488 W. Hillsborough Ave. #201
Tampa, Fl. 33615

Mailing Address Same

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

REINSTATEMENT 15-90

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, If Applicable		3. New Mailing Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business In Florida: 9/8/92

5. FEI Number: 593162684 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
CEO	Charles Broes	4914 E. Longboat Blvd	Tampa, Fl. 33615
Pres	Steve Tuthill	5328 Marina Pacifica	Long Beach, Ca
Dir	Laurence Lurie	917 Riverbend Blvd.	Longwood, Fl. 32779
Dir	Ron Pion	2936 Bottlebrush	Las Angeles, Ca.

8. Name and Address of Current Registered Agent

Laurence Lurie
917 Riverbend Blvd
Longwood, Fl. 32779

9. Name and Address of New Registered Agent

Name: Charles Broes
Street Address (P.O. Box Number is Not Acceptable): 4914 E. Longboat Blvd
Suite, Apt. #, Etc.:
City: Tampa | State: FL | Zip Code: 33615

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.

Signature of Registered Agent: Charles Broes — REGISTERED AGENT MUST SIGN — Date: 11/27/96

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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: Charles Broes — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — 11/27/96 Date — 813-855-7177 Daytime Phone #

CR2E040 (12/95)