


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

99 DEC 29 PM 4:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S21086

1. Corporation Name
Informed, Inc.

Principal Place of Business Mailing Address
926 Great Pond Dr. 20 E. Clementon Road
STE. 2002 STE. 1025
Altamonte Springs, Florida, 32714 Gibbsboro, NJ 08026

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

2. New Principal Office Address, if Applicable 5 Greentree Centre		3. New Mailing Office Address, if Applicable 5 Greentree Centre		4. Date Incorporated or Qualified To Do Business in Florida 12/24/90	
Suite, Apt. #, etc. Suite 311		Suite, Apt. #, etc. Suite 311		5. FEI Number 59-3049640	
City & State Marlton NJ 08053		City & State Marlton NJ		Applied For Not Applicable	
Zip 08053	Country USA	Zip 08053	Country USA	6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

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

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	David A. Cohen	5 Greentree Ctr, St 311	Marlton, NJ 08053
SVP/S	John M. Suender	5 Greentree Ctr., St 311	Marlton, NJ 08053
			300003096963-5 -01/13/00-01007-020 ***1350.00 ***1350.00

REINSTATEMENT 4599

8. Name and Address of Current Registered Agent CT Corporation System 1200 S. Pine Island Road Plantation FL 33324		9. Name and Address of New Registered Agent Name John M. Suender Street Address (P.O. Box Number is Not Acceptable) 9700 S. Dixie Highway Suite, Apt. #, Etc. Suite 610 City Miami State FL Zip Code 33156	
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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 [Signature] Date 12/28/99

REGISTERED AGENT MUST SIGN

11. This corporation owes the current year Intangible Personal Property Tax due June 30. 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 re-instatement 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 [Signature] John M. Suender, Sr. VP (800) 233-3030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E061 (12/98)