

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

04 JUL 19 AM 9:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **PO1000033319**

1. Corporation Name

The Lion & The Bull Inc.

2. Principal Office Address

505 32nd St

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip

33407

Country

USA

3. Mailing Office Address

505 32nd St

Suite, Apt. #, etc.

City & State

West Palm Beach, FL

Zip

33407

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-1101183

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Terry L Marince

Street Address (P.O. Box Number is Not Acceptable)

505 32nd St

Suite, Apt. #, Etc.

City

West Palm Beach, FL

State

FL

Zip Code

33407

10-14-03 01003 012

\$150.00

03-26-04 01079 015

\$150.00

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

Terry Marince

Date **6-19-04**

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
President	Terrance Marince	505 32nd St W.P.B. Fla	West Palm Beach FL 33407
Vice President	Matt Reber	505 32nd St	West Palm Beach FL 33407
Sec	Terrance Marince	505-32nd St	11 11 11 11
Treasurer	MATT Reber	505 32nd St	West Palm Beach Fla 33407

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 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:

Terry Marince

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

June 19, 04 561-832-2722

Date

Daytime Phone #

CR2E081 (01/04)

To Whom it may concern,
I would like the fee abatement for the year of 2003 and a waiver
of the \$400 late fee due to non- receipt.
We have changed our filing address to correct this matter.
Here is the document that you requested and my 2003 UBR with
the corrected signatures.
The 2004 UBR was filed in January along with a check for
\$150.00. I hope this is correct .
Thank you again and I hope this matter is corrected.

Signed- Terry Marince
PO1000033319

