

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 NOV -6 AM 9:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F01000004351

1. Corporation Name

Integrated Strategies, Inc.

2. Principal Office Address

180 Madison Avenue

3. Mailing Office Address

180 Madison Avenue

Suite, Apt. #, etc.

Suite 1102-A

Suite, Apt. #, etc.

Suite 1102-A

City & State

New York, NY

City & State

New York, NY

Zip

10016

Country

USA

Zip

10016

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

08/16/2001

5. FEI Number

134060519

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

F & L Corp.

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

200 Laura Street North

Suite, Apt. #, Etc.

City

Jacksonville

State

FL

Zip Code

32202

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

Date

10/30/02

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
SCEO	Adam Hock	180 Madison Avenue	New York, NY 10016
PTD	Robert Budenbender	180 Madison Avenue	New York, NY 10016

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/30/02

212-673-7420

CR2E081 (9/01)

INTEGRATED STRATEGIES, INC.
350 5TH AVENUE, SUITE 5101
NEW YORK, NY 10118

October 25, 2002

Florida Secretary of State
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Re: 2002 Uniform Business Report

Dear Madam or Sir:

Please consider our request to waive the \$600 reinstatement fee imposed for not submitting the Uniform Business Report ("UBR") for 2002 in a timely fashion. We did not receive the original UBR form or the notices that were sent.

INTEGRATED STRATEGIES, INC.
a Delaware corporation

By: 

Adam Hock
Chief Executive Officer