

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

07 DEC -5 PM 4:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F02000002702

1. Corporation Name

DYNAFLAIR CORPORATION

REINSTATEMENT

06-07

CR2E081 (1/07)

2. Principal Office Address - No P.O. Box #
8147 EAGLE PALM DRIVE

3. Mailing Office Address
8147 EAGLE PALM DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
RIVERVIEW, FL

City & State
RIVERVIEW, FL

Zip
33578

Country
USA

Zip
33578

Country
USA

4. Date Incorporated or Qualified
To Do Business in Florida **MAY 29, 2002**

5. FEL Number
04-3621054

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
GERALD S. PASTERNAK

Street Address (P.O. Box Number is Not Acceptable)
8147 EAGLE PALM DRIVE

Suite, Apt. #, Etc.

City
RIVERVIEW, FL

State Zip Code
FL 33569

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

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

Gerald S. Pasternak

REGISTERED AGENT MUST SIGN

Date **12/04/2007**

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 |
|--------|--------------------------------------|---|---|
| PD | GERALD S. PASTERNAK | 3441 BAYOU COURT | LONGBOAT KEY, FL 34228 |
| VD | MARILYN PASTERNAK | 3441 BAYOU COURT | LONGBOAT KEY, FL 34228 |
| | | | 100112850371 12/05/07--01024--014 **308.75 |
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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 contained in Chapter 119, 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

Gerald S. Pasternak

GERALD S. PASTERNAK

12/04/2007

(813) 248-8100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12/06