## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## APPLICATION FOR INSTATEMENT CUMENT #



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State DIVISION OF CORPORATIONS

CUMENT # F02000003034

RRY PHOTOGRAPHER INTERNATIONAL, INC.

ilicipal F	race of business	Mailing Address			ו ממכיום מ		·	
AQUA RA DRIVE :> NSEN BEACH FL 34957		63 AQUA RA DRIVE JENSEN BEACH FL 34957						
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*					600024443606 11/05/0301046016 **150.00			
If above addresses are incorrect in any way, line through incorrect in						<del></del>	<u>**15U.UU</u>	
New Principal Office Address, If Applicable     3. New		3. New Mail	Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			06/14/2002			
					5. FEI Number Applied For			
City & State		City & State			<u></u>		Not Applicable	
Zip	Country	Zip		Country	6. CERTIFICAT		Additional Fee required a Certificate of Status	
7. Names	and Street Addresses of Each Officer an	d/or Director (Flo	orida nonprofi	it corporations must list at le	ast 3 directors)		<del></del>	
Title(s)	Name of Officers and/or Directors		Street Address of Each Officer and/or Director			City / State / Zip		
PVST	CURRY, THOMAS	63 AQUA RA DRIVE			JENSEN BEACH FL 34957			
CD	CURRY, TRICIA			RA DRIVE		JENSEN BEACH FL 34957		
<del> </del>								
<del></del>	8. Name and Address of Currer	ent Registered Agent			9. Name and Address of New Registered Agent		ent	
				Name	<del></del>			
CURRY, THOMAS				Street Address (I	Street Address (P.O. Box Number is Not Acceptable)			
	UA RA DRIVE		·				ĺ	
JENSEN BEACH FL 34957				Suite, Apt. #, Etc.				
				City		State /	Zip Code	
10. I, bein	g appointed the registered agent of the a		oration, am fa	amiliar with and accept the o	bligations of Sect	ion 607.0505, F.S. or 617.0505, F		
							,	

11. 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 filling 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

SIGNATURE:

Signature of Registered Agen

SIGNATURE AND TOPED OR PRINTED NAME OF SIGNAL OFFICER OF DIRECTOR

on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

REGISTERED AGENT MUST SIGN

[4/8/0]

772-708-5447

Daytime Phone #

03 NOV -5 AM 9:44

Hello!

I Spoke with one of Your seps

On the Phone today. This Corporation is
based in Nevada and Does all Business overseas.

I Never received a bill from You, and did Not Know

I owed anything to Florida too. I have already
faid Nevada and Germany. Please accept this check
and reinstate my corporation here in Feorida. Please send
Next years Bill with Your answer, so I can fay
it in advance.

Thank you very Much,
Thomas-Curry
Owner/ President Curry Photographer

John wy