

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION  
REINSTATEMENT



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

FILED

02 APR 10 PM 4:03

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F96000000301

1. Corporation Name

NOISEAU ENTERPRISES, INC.

2. Principal Office Address

146 Atlantic Avenue

3. Mailing Office Address

same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Palm Beach, Florida

City & State

Zip Country

33480 USA

Zip Country

4. Date Incorporated or Qualified  
To Do Business in Florida

1/17/96

5. FEI Number

650631559

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

02-19-01 90017045 \$150.00

7. Name and Address of Current Registered Agent

Name

DEYSE RACY

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

146 Atlantic Avenue

Suite, Apt. #, Etc.

City

Palm Beach

State

FL

Zip Code

33480

000005326580--7  
-04/23/02--01058--029  
\*\*\*\*158.75 \*\*\*\*158.75

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*[Signature]*

Date

4/1/02

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
P	Deyse Racy	146 Atlantic Avenue	Palm Beach, FL 33480
VS	Tania Racy	146 Atlantic Avenue	Palm Beach, FL 33480

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]*

DEYSE S RACY

4/1/02

do

561-820-9177

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**RAE FRANKS, ESQUIRE, P.A.**  
**700 North Olive Avenue**  
**West Palm Beach, Florida 33401**  
**(561) 820-9177 Fax: (561) 820-9607**

**Certified Mail - Return Receipt Requested**

March 27, 2002  
Corporation Reinstatement  
Dept. Of State/Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**RE: Reinstatement of Noiseau Enterprises, Inc.**

Dear Sir or Madam:

Please be advised that my client, Deysy Racy, had sent in payment of \$150 for the year 2001 report, and the check was cashed. However, she never heard back from the Division of Corporations, nor did she receive a rejection letter. It is my understanding that the 2001 report was rejected as it was not signed by the registered agent. The old registered agent never advised of this problem.

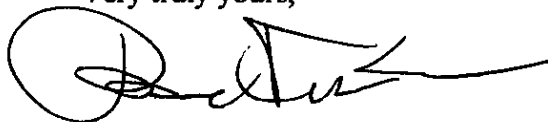
I am hereby requesting that the late fee be waived in this matter, as the 2001 report should have been accepted.

I enclose herewith the 2002 reinstatement report, and the check for \$158.75, as required.

Please reinstate this corporation, and provide me with a copy and a certificate of status..

Thank you for your prompt attention to this matter.

Very truly yours,



RAE FRANKS, ESQUIRE

RF/rf  
Encl.

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