

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # M72829

1. Corporation Name

TRADER RICK'S INC.

Principal Place of Business

P.O. BOX 1444
SANIBEL FL 33957

Mailing Address

P.O. BOX 1444
SANIBEL FL 33957

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

03/21/1988

5. FEI Number

65-0044682

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PST	SADLER, RICHARD A.	P.O. BOX 1444 N/A	SANIBEL FL
D	SADLER, RICHARD A.	P.O. BOX 1444 N/A	SANIBEL FL
VP	SADLER, LISA C.	P.O. BOX 1444 N/A	SANIBEL FL

700002885487
11/08/02--01019--008 **150.00

8. Name and Address of Current Registered Agent

SADLER, RICHARD A.
12794 SUMMERWOOD DR
FT MYERS FL 33908

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

[Signature]
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date 11-05-02

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 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]
SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

941-
11-05-02 454-0930

CR2E040 (9/02)



f o r t h e a r t f u l w o m a n

November 5, 2002

To Whom it may concern,

Concerning the dissolution of Trader Rick's, Inc. due to non-payment of Annual Report Fees, the green packet requesting payment was never received.

Since incorporating in 1988, I have never failed to file in a timely manner, please waive the Reinstatement fee and find enclosed, a check for \$150.00 to bring the corporation fees to date.

Sincerely,


R. A. Sadler, Pres.