

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

02-03 UBR

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 MAY 22 AM 9:54

DOCUMENT # N01000007428

1. Corporation Name

DONALD'S HONOR, INC.

2. Principal Office Address

2817 N.E. 32nd Street

Suite, Apt. #, etc.

Suite 101

City & State

Ft. Lauderdale, FL

Zip

33306

Country

U.S.A.

3. Mailing Office Address

2817 N.E. 32nd Street

Suite, Apt. #, etc.

Suite 101

City & State

Ft. Lauderdale, FL

Zip

33306

Country

U.S.A.

600014442926

05/29/03--01082--005 **43.75

3/25/03 01011 002 78.75

**4. Date Incorporated or Qualified
To Do Business in Florida**

October 18, 2001

5. FEI Number

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$375 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

DONALD DAVIS

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

2817 N.E. 32nd Street

Suite, Apt. #, Etc.

Suite 101

City

Fort Lauderdale

State

FL

Zip Code

33306

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

Donald Davis

REGISTERED AGENT MUST SIGN

Date May 9, 2003

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/D	DONALD DAVIS	2817 N.E. 32 Street, #101	Ft. Lauderdale, FL 33306

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:

Donald Davis

Donald Davis

May 9, 2003

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E081 (10/02)