

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # N34228

1. Corporation Name

FRIENDS SERVICES INTERNATIONAL, INC.

Principal Place of Business

211 N.W. 102 STREET  
MIAMI FL 33150  
US

Mailing Address

211 N.W. 102 STREET  
MIAMI FL 33150  
US

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

09/15/1989

5. FEI Number

NOT APPLICABLE

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
CPD	SELF, JOHN A	<del>3 PRINCE STREET</del> P.O. Box 153 Bishop Desmond Smith St.	<del>BELEZE CITY, CENTRAL AMERICA</del> San Ignacio, Belize, CA.
VTD	WILLIAMS, LEONARD	<del>3 PRINCE STREET</del> P.O. Box 153 Bishop Desmond Smith St.	<del>BELEZE CITY, CENTRAL AMERICA</del> San Ignacio, Belize, CA.
SD	CAMERON, GEORGE D	<del>#3 PRINCE ST.</del> Calle 43, #524 Centro, X 64 y 66	<del>BELEZE CITY, BELIZE, C.A.</del> Merida, Yucatan, MX 97000
D	CORDRAY, DICK	6016 TRENT DR	HUNTSVILLE AL 35810
D	DAGHAR, PELZER	211 N.W. 102 STREET	MIAMI FL 33150
D	JONES, CHUCK	2915 OZARD ROAD	CHATTANOOGA TN 37415

8. Name and Address of Current Registered Agent

PELZER, DAGMAR  
211 N.W. 102 STREET  
MIAMI FL 33150

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

REINSTATEMENT  
0000004698890-3  
11/29/01-0070-012  
\*\*\*\*245.00  
FL

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.

Signature of  
Registered Agent

SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date Nov 1, 2001

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
John A. Self

Date

Daytime Phone #

24 Oct 01 (501) 2-4492

CR2E040 (8/01)