

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

06 MAR -9 PM 3: 32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **00000019023**

1. Corporation Name

**OPALMAGAZINE.COM INCORPORATED**

600068107456

03/20/06-01021-030 \*\*\*608.75

2. Principal Office Address

**10 EAST 38TH STREET**

3. Mailing Office Address

**10 EAST 38TH STREET**

Suite, Apt. #, etc.

**4TH FLOOR**

Suite, Apt. #, etc.

**4TH FLOOR**

City & State

**NEW YORK, NY**

City & State

**NEW YORK, NY**

Zip

**10016**

Country

**NEW YORK**

Zip

**10016**

Country

**NEW YORK**

4. Date Incorporated or Qualified  
To Do Business in Florida

**2/23/00**

5. FEI Number

**05-0989377**

Applied For

☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name

**UCC FILING & SEARCH SERVICES, INC.**

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

**1574 VILLAGE SQUARE BOULEVARD**

Suite, Apt. #, Etc.

**SUITE 100**

City

**TALLAHASSEE**

State

**FL**

Zip Code

**32309**

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

**Ed Hand Pres.**

Date

**3/9/06**

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
D	WELLINGTON, ABRAHAM	10 EAST 38TH STREET	NEW YORK, NY 10016
D	BLAKE, LISSA	10 EAST 38TH STREET	NEW YORK, NY 10016

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 contained in Chapter 119, 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:

**Abraham Wellington**

Date

**3/6/06**

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Opalmagazine.com, Inc

202

10 East 38<sup>th</sup> Street  
4<sup>th</sup> Floor  
New York, NY 10016  
212-532-9898  
212-532-7151

February 20, 2006

Florida Department of State  
Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Opalmagazine.com Incorporated – Corporation Reinstatement

Dear Sir or Madam:

Enclosed please find a check for \$608.75 required for the reinstatement of the corporation and receipt of a Certificate of Status. *Never Received 2003 AR*

Due to postal service difficulties mail has not been reaching our offices and we respectfully request abate of penalty fees.

Very truly yours,



Abraham Wellington