

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *Psychic*

APPLICATION
FOR



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 NOV -6 PM 12:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000064638

1. Corporation Name

FLIPEMTHEBIRD.COM, INC.

Principal Place of Business

ONE EAST BROWARD BLVD. #700
FORT LAUDERDALE FL 33301

Mailing Address

ONE EAST BROWARD BLVD. #700
FORT LAUDERDALE FL 33301



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

2. New Principal Office Address, If Applicable

3891 Sterling Road

Suite, Apt. #, etc.

Suite 4W

City & State

Fort Lauderdale, FL

Zip

33312

Country

USA

3. New Mailing Office Address, If Applicable

3891 Sterling Road

Suite, Apt. #, etc.

Suite 4W

City & State

Fort Lauderdale, FL

Zip

33312

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

07/05/2000

5. FEI Number

65-1047261

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

VP

BYER, ANDREW A

ONE EAST BROWARD BLVD #700

FORT LAUDERDALE FL 33301

P

Berman, David

3891 Sterling Road
Suite 4W

Fort Lauderdale, FL
33312

300008841373

11/06/02--01146--010 **150.00

02 UBR 178

8. Name and Address of Current Registered Agent

BYER, ANDREW A

ONE EAST BROWARD BLVD. #700

FORT LAUDERDALE FL 33301

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 REQUIRED

REGISTERED AGENT MUST SIGN

Date

10/30/02

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)(f), 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Andrew Byer V.P.

Date

Daytime Phone #

(954) 760 7270

CR20040 (8/02)

pyer

Andrew A. Byer
Attorney at Law

One East Broward Blvd.
Suite 700
Fort Lauderdale, Florida 33301

Phone (954) 760-7270
Fax (954) 760-7068

Division of Corporations
Annual Report Section
P.O. Box 6327
Tallahassee, FL 32314-6327

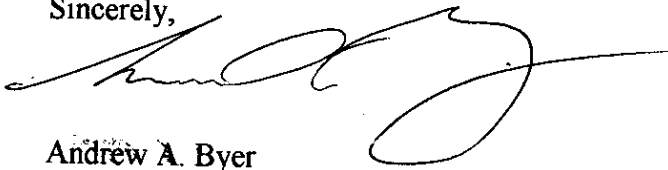
Re: reinstatement
Doc# P00000064638
FLIMEMTHEBIRD.COM, INC.

October 30, 2002

Dear Sirs,

As the former corporate officer and registered agent of the above referenced entity to whom corporate mail still arrives, I hereby certify that the two previous notices of annual reports were never received. Hence, I enclose the \$150.00 annual fee and request reinstatement. Thank you.

Sincerely,



Andrew A. Byer