

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

02 DEC -3 PM 2:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000070979

1. Corporation Name

The Compleat Angler.com, Inc.

2. Principal Office Address

283 Catalonia Avenue

Suite, Apt. #, etc.

2nd Floor

City & State

Coral Gables, Florida

Zip

33134

Country

USA

3. Mailing Office Address

283 Catalonia Avenue

Suite, Apt. #, etc.

2nd Floor

City & State

Coral Gables, Florida

Zip

33134

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

June 25, 2002

5. FEI Number

65-1100987

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

Miami Corporate Systems, Inc.

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

283 Catalonia Avenue

Suite, Apt. #, Etc.

2nd Floor

City

Coral Gables

State  
FL

Zip Code

33134

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

REGISTERED AGENT MUST SIGN

Date November 18, 2002

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	Michael E. Curry	3031 Jet Wing Drive	Colorado Springs, CO 80916

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:

Michael E. Curry, Director

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/22/02 (719) 440-1870

Daytime Phone #

CR2E081 (9/01)

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**RASCO REININGER PEREZ & ESQUENAZI, P.L.**  
**ATTORNEYS & COUNSELORS AT LAW**

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José Manuel Pallí  
Of counsel

\*Board Certified-Business Litigation

November 22, 2002

**Via Certified Mail**

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

Re: Reinstatement of The Compleat Angler.com, Inc. (the "Corporation")  
**Document # P00000070979**

Dear Sir or Madam:

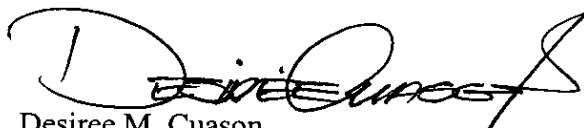
Enclosed please find a Corporation Reinstatement application for the above-referenced Corporation. Further enclosed is check number 2552 in the amount of \$158.75, representing the \$150.00 annual report fee for the year 2002 and \$8.75 for a Certificate of Status.

On or before May 2001, a Notice of Filing Annual Report was mailed to the Department of State along with a check in the amount of \$150.00, which check was subsequently cashed. No further notice was received from the Department of State. We, therefore, respectfully request that all late fees be waived in connection to the reinstatement of said Corporation.

Thank you for your prompt attention to this matter. Please do not hesitate to contact me should you have any further questions.

Very truly yours,

RASCO REININGER PEREZ & ESQUENAZI, P.L.



Desiree M. Cuason  
For the Firm