

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FILED

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

02 DEC 16 PM 1:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000086830

1. Corporation Name

ISLAND FANS INC.
C/O STEVEN S. LINDENBAUM, CPA, PA
767 S STATE RD 7, STE 24
MARGATE, FL 33068

900009523839
12/16/02--01055--005 **300.00

2. Principal Office Address
SAME AS ABOVE

3. Mailing Office Address
SAME AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

BROWARD

Zip

Country

BROWARD

4. Date Incorporated or Qualified
To Do Business in Florida 9/13/00

5. FEI Number
65-1039519

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
PAUL R LANTZ

Street Address (P.O. Box Number is Not Acceptable)
C/O STEVEN S. LINDENBAUM, 767 S STATE RD 7-

Suite, Apt. #, Etc.
STE 24

City
MARGATE

State
FL

Zip Code
33068

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

Date Dec 12, 02

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
-PRES	PAUL LANTZ	4825 NE 12th AVENUE	OAKLAND PARK FL 33334

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Dec 12, 02

Daytime Phone #

CR2E081 (9/01)

December 12, 2002

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

Re: Island Fans, Inc.
Doc. No.: P00000086830 -
EIN: 65-1039519

Dear Sir/Madam:

I am writing on behalf of my corporation, Island Fans, Inc., requesting a waiver of penalty due to not receiving the renewal notice from the Department of State.

Being a new corporation, I was unaware that a notice of renewal would be sent to me and never questioned that I did not receive it. I am undergoing a divorce, thus, if the renewal notice were mailed to the home address, I would not have received it, since I am no longer at the listed address.

I am asking that the filing fees of \$300.00 for 2001 and 2002 be sufficient to reinstate my corporation.

If there any questions, please do not hesitate to call me.

Sincerely,



Paul Lantz

Enclosure:
Corporation Reinstatement Form