

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 OCT 14 AM 11:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P01000026720**

1. Corporation Name

Lexus International, Inc.

900023805679
10/15/03--01023--004 **8.75

900023805679
10/15/03--01023--003 **900.00

REINSTATEMENT 02-03

4. Date Incorporated or Qualified
To Do Business in Florida **3-14-2001**

5. FEI Number

Applied For

☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

2. Principal Office Address

12901 Hutton Drive

Suite, Apt. #, etc.

City & State

Dallas, Texas

Zip

75234

Country

U.S.A.

3. Mailing Office Address

12901 Hutton Drive

Suite, Apt. #, etc.

City & State

Dallas, Texas

Zip

75234

Country

U.S.A.

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

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

1201 HAYS STREET

Suite, Apt. #, Etc.

TALLAHASSEE

City

FLORIDA

State

FL

Zip Code

32301

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

Laura R. Dunlap

Laura R. Dunlap
Asst. Secretary

REGISTERED AGENT MUST SIGN

Date

9/30/03

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
P.T.S.C.	MARK D. WOODBURN	12901 Hutton Drive	Dallas, Texas 75234

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:

MARK D. WOODBURN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/25/03

Date

Daytime Phone #

972-241-4080

CR25081 (10/02)