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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P01000036808**

1. Corporation Name

NORSK, INC.

2. Principal Office Address

200 S. Hoover Blvd

Suite, Apt. #, etc.

Suite 110

City & State

Tampa, FL

Zip

33609

Country

USA

3. Mailing Office Address

200 S. Hoover Blvd.

Suite, Apt. #, etc.

Suite 110

City & State

Tampa, FL

Zip

33609

Country

USA

CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida

April 6, 2001

5. FEI Number

59-3719140

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

BENJAMIN NORBOM

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

200 S. HOOPER BLVD.

Suite, Apt. #, Etc.

Suite 110

City

Tampa, FL

State

FL

Zip Code

33609

TS 8/9/06
REINSTATEMENT 03-06

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

Benjamin E. Norbom

REGISTERED AGENT MUST SIGN

Date

5/1/06

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/ Secretary	BENJAMIN E. NORBOM	200 S. HOOPER BLVD #110	Tampa, FL 33609

900078619759
02/11/06 01008 015 **600.00

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:

Benjamin E. Norbom

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

5/1/06

Daytime Phone #

813 503 2223

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ATTN: Sylvia Gilbert Norsk, Inc.
200 S. Hoover Blvd.
Suite 110
Tampa, Fl. 33609
813.503.2223

May 1, 2006

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

RE: Waiver of the reinstatement fee

Dear Sir/Madam:

I was in the process of changing banks and opening a new account when the new bank informed me that Norsk, Inc. was an inactive corporation due to its' failure to file annual reports since 2003.

I request that you waive the reinstatement fee for the reason that the invoice was never received. At or around that time the Post Office was having difficulty delivering mail to our office park due to our confusing building numbers. You will note from the above letterhead address that the Post Office has eliminated the confusing building numbers and now each building has its' own street address (i.e. 200 South Hoover).

I have enclosed a Norsk check in the amount of \$600, which is computed at \$150.00/yr (\$61.25 + \$88.75) for 2003, 2004, 2005 and 2006.

If you have any questions please feel free to contact me. Thank you for your consideration.

Sincerely,



Ben Norbom
President