

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 OCT 23 PM 3:16

DOCUMENT # P01000037413

1. Corporation Name

FLORIDA EDUCATIONAL MARKETING, INC.

Principal Place of Business

2615 WEST GRAND RESERVE CIR.
SUITE 3T1
CLEARWATER FL 33759

Mailing Address

2615 WEST GRAND RESERVE CIR.
SUITE #311
CLEARWATER FL 33759

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

REINSTATEMENT

03

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

04/12/2001

5. FEI Number 06-1665004
~~65-1004162~~

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
PD	GOLDING, CHARLES G	302 NE 92ND STREET	MIAMI SHORES FL 33138
PD	GOLDING, CHARLES G	2615 West Grand Reserve Circle, #311	Clearwater FL 33759

700024054737

10/23/03 01078 000 **150.00

8. Name and Address of Current Registered Agent

GOLDING, CHARLES G
2615 WEST GRAND RESERVE CIR.
SUITE 311
CLEARWATER FL 33759

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

Charles G. Golding
REGISTERED AGENT MUST SIGN

Date

10-15-2003

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)(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:

Charles G. Golding
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10-15-2003
in 128 ad

CR2E040 (7/03)

FLORIDA EDUCATIONAL MARKETING, INC.

2615 WEST GRAND RESERVE CIRCLE #311

CLEARWATER, FLORIDA 33759

TELEPHONE: (727) 796-1283

FAX: (727) 796-1452

EMAIL: worldbooknfl@earthlink.net

October 15, 2003

Department of State
Division of Corporations
Annual Report/Reinstatement Section
P. O. Box 6327
Tallahassee, Florida 32314-6327

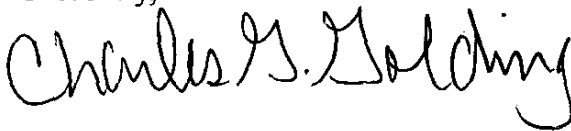
Dear Sir/Madam,

06-1665000
FEI Number: 65-1094162

I respectfully request reinstatement for my Corporation, FLORIDA EDUCATIONAL MARKETING, INC., on the grounds that I did not receive two (2) prior Uniform Business Reports from your office.

To this regard, I am enclosing a check in the amount of One Hundred and Fifty Dollars (\$150.00) to cover the cost of reinstatement.

Sincerely,



Charles G. Golding
President