

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
**Glenda E. Hood**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P01000062101**

1. Corporation Name

**BURTANGER INVESTMENTS INC.**

Principal Place of Business

12951 METRO PKWY.  
UNIT 4  
FORT MYERS FL 33912  
US

Mailing Address

12951 METRO PKWY.  
UNIT 4  
FORT MYERS FL 33912  
US

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

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

**06/20/2001**

5. FEI Number

**65-1115075**

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status



**300024865059**  
**11/20/03--01002--007 \*\*158.75**

**REINSTATEMENT 03**

**03 NOV 20 PM 11:15**

FILED  
CLERK OF STATE  
DIVISION OF CORPORATIONS

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
PS	BURTANGER, LISA M	<del>3813 S.W. SECOND AVE.</del> 17144 Antigua Rd	<del>CAPE CORAL FL 33914</del> FT. Myers, FL 33912

8. Name and Address of Current Registered Agent

BURTANGER, LISA M  
~~3813 S.W. SECOND AVE.~~ 17144 Antigua Rd  
CAPE CORAL FL 33914 FT. Myers, FL 33912

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

*Lisa M. Burtanger*

REGISTERED AGENT MUST SIGN

Date **11-13-03**

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:

*Lisa M. Burtanger*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**11-13-03 (239) 561-6555**

Date

Daytime Phone #

CR2E040 (7/03)

To Whom It May Concern;

11/13/03

This letter is to clarify that Burtanjer Investments Inc., FEI # 65-1115075 should be reinstated.

I, Lisa Burtanjer (owner) has not received any UBR notices due to a pending divorce + all documents to the old address were never forwarded to me by my unsefull soon to be ex-husband.

Also, my business was broken into in April of 2003 and all legal and business documents were stolen. I am in the process of working with my accountant to rectify all areas of the business.

Any questions please contact me at (239) 561-6555 work  
(239) 822-6555 cell.

Thank You,  
Lisa M. Burtanjer