

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 JAN -9 AM 9:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000062123

1. Corporation Name

Irys Enterprises, Inc.

2. Principal Office Address

3834 SW 30th Avenue

Suite, Apt. #, etc.

City & State

Hollywood, FL

Zip

33312

Country

USA

3. Mailing Office Address

5079 North Dixie Highway

Suite, Apt. #, etc.

PMB 178

City & State

Fort Lauderdale, FL

Zip

33334

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

06/22/2001

5. FEI Number

65-117712

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

Barnhart, Phillip W

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

4310 North East 16th Terrace

Suite, Apt. #, Etc.

City

Fort Lauderdale

State
FL

Zip Code
33334

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

REGISTERED AGENT MUST SIGN

Date 01/06/2003

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
D	Barnhart, Phillip W	4310 North East 16th Terrace	Fort Lauderdale, FL

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

01/06/2003 (954) 394-5418

Date

Daytime Phone #

CR2E081 (10/02)

gs 1/10

IRYS ENTERPRISES, INC.
5079 NORTH DIXIE HIGHWAY PMB 178
FORT LAUDERDALE, FLORIDA 33334
Phone (954) 771-7664 Fax (954) 771-2116

January 6, 2003

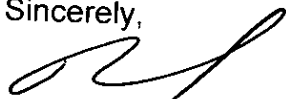
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Sirs,

Please be advised that we did not and have not received any correspondence from you concerning the annual uniform business report. We sent a check and reinstatement form in November 2002 and we did not receive anything from your office.

Please find a check in the amount of \$300.00 and a completed reinstatement form. This should make us current through 2003. Thank you for your help.

Sincerely,



Phillip W. Barnhart II
Director