

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 MAR 12 AM 7:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

101-84258

1. Corporation Name

PROMPTRR, INC.

2. Principal Office Address

1001 YAMATO ROAD

Suite, Apt. #, etc.

#400

City & State

Boca Raton

Zip

33431

Country

3. Mailing Office Address

1001

Suite, Apt. #, etc.

City & State

FL

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

8/24/01

5. FEI Number

01-0635072

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

TRACY TILSON

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

1001 Yamato Rd

Suite, Apt. #, Etc.

#400

City

Boca Raton

State

FL

Zip Code

33431

500030595605

03/17/04--01006--013 ***300.00

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

3/9/04

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	Tracy Tilson	1001 Yamato Rd. #400	Boca Raton, FL 33431

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

Tracy Tilson, Pres 3/9/04 561-998-1995

Date

Daytime Phone #



3/10/04

To Whom it May Concern:

(#300 check)

Enclosed please find a check for \$150 for 2003 and \$150 for 2004 for PromptPR! Inc. for annual report fees. I do not recall every receiving the annual report document for last year or any notices and therefore, we have to reinstate. We were moving from our old location, and somehow I did not receive this packet.

Name: PromptPR! Inc.

FEI: 01-0635072

Correct Address:

1001 Yamato Road

#400

Boca Raton, FL 33431

In consideration of this, we are asking for late fees to be waived in the amount of \$300.00.

Thank you so much for your attention to this matter.

Sincerely,

Tracy Tilson

President