


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 OCT -9 PM 2:45

DOCUMENT # PD1000086710

1. Corporation Name
Burge Daly, Inc.

000023977500
10/21/03--01087--030 **150.00

2. Principal Office Address
2269 S. University Dr. #123
Suite, Apt. #, etc.

3. Mailing Office Address
2269 S. University Dr. #123
Suite, Apt. #, etc.

City & State
DAVIE FL

City & State
DAVIE FL

Zip Country
33324

Zip Country
33324

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number
65-1137187

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
Clay Contouris

Street Address (P.O. Box Number is Not Acceptable)
1164 S. Powerline Rd

Suite, Apt. #, Etc.

City
Pompano Beach

State Zip Code
FL 33069

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 [Signature] Date Oct 7, 2003

REGISTERED AGENT MUST SIGN

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 |
|--------|-----------------------------------|--|------------------------|
| PSTD | Amber Burge | 2269 S. Univ. Dr. #123 | Davie, FL 33324 |
| VD | Mary Ellen Daly | 5101 S.W. 160th Ave. | S.W. Ranches, FL 33331 |
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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: Amber Burge Date 10/7/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E081 (10/02)

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Burge Daly, Inc.
FEI# 65-1137187

Dear Agent,

Enclosed you will find a check for \$150.00 for the Uniform Business Report filing for Burge Daly, Inc. The corporate officers did not receive a prior notice to file with the state. The place of business for the corporation has changed and mail may have gotten lost. The correct address is as follows:

Burge Daly, Inc.
2269 S. University Drive #123
Davie, FL 33324

We are asking you to waive the late filing penalty since we did not receive the first notice. I am the accountant and you can contact me at (954) 972-9665 if you have any questions or require any additional information. Thank you for your attention to this matter.

Sincerely,


Clay Contouris