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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

2005 SEP 30 PM 12:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PD1000105167

1. Corporation Name

HIZARD LOUNGE INK, INC.

REINSTATEMENT

03-05

CR2E081 (8/05)

2. Principal Office Address

609 W Vine St.

Suite, Apt. #, etc.

C3

City & State

Kissimmee, FL

Zip

34741

Country

OSCEOLA

3. Mailing Office Address

609 W Vine ST

Suite, Apt. #, etc.

C3

City & State

Kissimmee, FL

Zip

34741

Country

OSCEOLA

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

59-375 4075

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

Virginia C Gibson - Barker

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

609 W. VINE ST

Suite, Apt. #, Etc.

C3

City

KISSIMMEE

State

FL

Zip Code

34741

300060019753

09/28/05--01004--005 ***450 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

X Virginia C Barker

REGISTERED AGENT MUST SIGN

Date

9/19/05

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
P/S	<u>VIRGINIA C GIBSON</u>	<u>609 W VINE ST</u> <u>SUITE C3</u>	<u>KISSIMMEE FL 34741</u>
T	<u>JADE NARR GIBSON</u>	<u>609 W. VINE ST</u> <u>C3</u>	<u>KISSIMMEE FL 34741</u>

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:

X Virginia C Barker

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/19/05

407-729-5920

9130 Per Pet...

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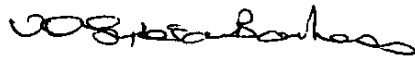
September 19, 2005

Florida Department of State
Division of Corporation
P.O. Box 1500
Tallahassee, Florida 32302-1500

Dear: Sirs

Enclosed you'll find check issue to you in the amount of \$450.00. You'll also find a copy of the completed Corporation Reinstatement form for our company. We are sending you this payment and at the same time voice our apology to you for not having it paid sooner. It came as quite a shock and surprise that our corporation was not active and dissolved. We thought that all matters were up to date and that we were active. I am new to this country and not familiar with the law and the person I had that handled this matter for me is no longer with me. Please waive the reinstatement fee of \$600.00 due to you from us. I will make sure that from now on we will be paying this fee on time by the 1st of May. Please note our new address and other information you require. Please accept the enclosed and adjust the records accordingly. Should you have any question, you may give me a call at 407-729-5920. Thank you.

Sincerely,



Virginia C. Gibson Barkess
President/Director
Lizard Lounge Ink, Inc.
Doc# P01000105167