

1 of 2

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

04 MAY -6 PM 5:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

OmniGreen

P02000050075

200035553542
05/06/04--01012--026 **300.00

2. Principal Office Address

16 Sexton Cove

Suite, Apt. #, etc.

3. Mailing Office Address

16 Sexton Cove

Suite, Apt. #, etc.

City & State

Key Largo, FL

Zip

66037

Country

USA

City & State

Key Largo, FL

Zip

66037

Country

USA

REINSTATEMENT

~~03-04~~

4. Date Incorporated or Qualified
To Do Business in Florida

5/07/02

5. FEI Number

03-0441916

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

Brett Siebenaler

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

16 Sexton Cove

Suite, Apt. #, Etc.

City

Key Largo

State

FL

Zip Code

66037

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

Brett Siebenaler

REGISTERED AGENT MUST SIGN

Date 04/30/04

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
Mr.	Brett Siebenaler	16 Sexton Cove	Key Largo / FL / 66037

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:

Brett Siebenaler

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/30/04

Date

970-214-1047

Daytime Phone #

CR2E081 (01/04)

B

Omni Green Inc.
16 Sexton Cove
Key Largo, FL 66037
(970) 214-1047

April 30, 2004

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

Dear Division of Corporations:

I am writing in regards to corporation reinstatement for Omni Green Inc. It has come to my attention that my corporation has been dissolved. I believe this happened because I never received annual reports for 2003 and 2004. I assume they were mailed but possibly lost in the process of two moves and change of addresses. I remember my accountant mentioning something about these annual reports when we formed Omni Green Inc. in 2002. Unfortunately the proper fees were never made to prevent my corporation from being dissolved. This is partially my fault due to my own ignorance in running a newly formed corporation correctly. I am now totally informed on how to handle these annual reports so there will be no problems in the future. Please accept my payment of \$300.00 in good faith for the fees due in 2003 and 2004.

Please call or mail to the above address with any questions or advice.

Very truly yours,

Brett Siebenaler