

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 OCT -9 AM 9:18

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # 102-59901

1. Corporation Name

Island Home International, Inc.

2. Principal Office Address

211 E. Ocean Avenue

Suite, Apt. #, etc.

City & State

Lantana, Florida

Zip

33462

Country

U.S.A

3. Mailing Office Address

211 E. Ocean Avenue

Suite, Apt. #, etc.

City & State

Lantana, Florida

Zip

33462

Country

u.s.a

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

05/30/2002

5. FEI Number

32-0021212

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

Peter Mergenthaler

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

4188 GulfStream Road

Suite, Apt. #, Etc.

City

Lake Worth

State

FL

Zip Code

33461

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

Peter Mergenthaler

REGISTERED AGENT MUST SIGN

Date

10/03/03

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/D	Peter Mergenthaler	4188 GulfStream Road	West Palm Beach, Florida 33461

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

Date

Daytime Phone #

Peter Mergenthaler Oct 2 2003 561-533-2222

CR2E081 (10/02)

7/10/9

Island Home Internatioanl, Inc.

211 E. Ocean Avenue

Lantana Fl, 33462

561-533-7222

October 2, 2003

to : Reinstatement Dep.

Due to new incorporation we never received U.V.R Report.

Please except \$ 150.00 for reinstatement, it will be appreciated.

If you have any question feel free to call us at 561-533-9009

Island Home International