

1 of 3

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

04 MAR 16 AM 9:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 002000083283

1. Corporation Name

U.S. Avenger, Inc.

REINSTATEMENT 03-04

2. Principal Office Address

2001 SW 20th Street

Suite, Apt. #, etc.

11P

City & State

Ft. Lauderdale, Florida

Zip

33315

Country

Broward

3. Mailing Office Address

2001 SW 20th Street

Suite, Apt. #, etc.

11P

City & State

Ft. Lauderdale, FL

Zip

33315

Country

Broward

000029593440

03/01/04--01044--012 \*\*150.00

4. Date Incorporated or Qualified  
To Do Business in Florida

7-31-2004

5. FEI Number

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

Duncan Brown

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

2001 SW 20th Street

Suite, Apt. #, Etc.

11P

City

Ft. Lauderdale

State  
FL

Zip Code

33315

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

JAN 28 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
D	Duncan Brown	2001 S.W. 20th Street Suite 11P	Ft. Lauderdale, FL 33315

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 #

JAN 28 04

CR2E081 (10/02)

2 of 3

January 26, 2003

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

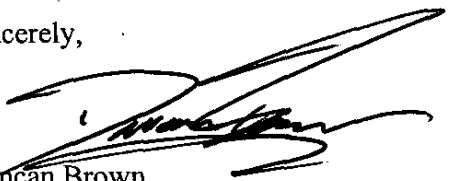
RE: U.S. AVENGER, INC.

To whom it may concern:

~~This letter is to confirm that I never received the 2003 UBR report in the mail to~~  
pay the \$150.00 fee. I was only just recently made aware that my company went inactive  
due to not paying the annual fee. I want to continue to have my company active. I've  
enclosed the \$150.00 fee to reinstate U.S. Avenger, Inc. effective immediately.

Any questions or concerns please contact Duncan Brown at 954-763-6562. Thank  
you very much for your attention to this matter.

Sincerely,



Duncan Brown  
2001 SW 20<sup>th</sup> street  
Suite 118  
Ft. Lauderdale, FL 33315  
954-763-6562