PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION	
REINSTATEMENT	



FLORIDA DEPARTMENT OF STATE

FILED

REINSTATEMENT				Secretary of State DIVISION OF CORPORATIONS				04 AUG 12 PM 4: 38					
DOCUMEN 1. Corporation Name	IT # (€	020001	21490 F CAMP, IN				T/	SECHETA ALLAHA!	NRY OF S SSEE, FL	ORIDA			
SINGER	ISLA	AND SURI	F CAMP, IN	C									
2 Principal Office Ac 1276 N U Suite, Apt. #, etc.	3. Mailing Office Addr 1276 N H7 Suite, Apt. #, etc.	10 1 10 00 11 011				REMSTATEMENT 03-04							
City & State RIV [ERA BEACH FL			City & State RIVIERA BEACH FL				4. Date Incorporated or Qualified To Do Business in Florida 11 – 12 – 02 5. FEI Number Applied For						
zip 33404	Countr		33404	Cour			6. CERTIFICATE	1162			Not Ap	pplicable e requirec	
00101	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		_							for a Ce	ertificate o	f Status	
Name	Name PAIGE PARKER												
Street A	Street Address (P.O. Box Number is Not Acceptable) 1276 N HARBOR DR									353 <u>7</u>			
	Suite, Apt. #, Etc.							U4U1	05405]4 **[] [#), 		
City	City RIVLERA BEACH						State Zip Code 33 404						
8. I, being appointed Signature of Registered Agent	the register	Juix &	e named corporation, am Limited Section 1 am CISTERED AGENT MUS		with and accept th	he obliç	gations of section	on 607.050 Date _	5 or 617.050 B 9	104			
9. Names and Stree	t Addresses	of Each Officer and	or Director (Florida nonpi	ofit corp	orations must list a	at leas	t 3 directors)						
Titles	Name of Officers and/or Directors				Street Address of E Officer and/or Dire								
PRES PAI	6E	PARKER	1270	N	HARBOR	DF	ξ	RIVI	een e	BEARH	FL3	3404	
									· · · · · · · · · · · · · · · · · · ·				
10. I certify that I am	an officer or	director or the receiv	er or trustee empowered	to execu	ite this application	as pro	vided for in cha	pter 607 or	617, F.S. I fi	urther 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 any signature shall have the same legal effect as if made under oath.

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

August 9, 2004

To Whom It May Concern:

I am writing this letter to request reinstatement of my Florida Corporation, Singer Island Surf Camp, Inc., and waiver of the associated reinstatement fee. I was incorporated in November of 2002 but did not receive an annual report. I didn't think anything of it at the time as the corporation did no business in 2002 and we incorporated just before the end of the year. I have now come to realize that I should have received an annual report and because I did not my corporation was dissolved.

Enclosed please find check #1750 for \$300.00 for the annual report fee for 2002 and 2003.

Thank you for time in addressing this matter-

100 de

Paige Parker, President

Singer Island Surf Camp, Inc.

1276 North Harbor Drive

Riviera Beach, FL 33404

Ph: 561-882-1572

OH AUG 12 PM 4:38

רובר כ