

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 28 PM 12:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P02000123436

1. Corporation Name

PRIZM LIGHTING INC.

Principal Place of Business

Mailing Address

637 HERITAGE AVE
WESTERN FL 33326

637 HERITAGE AVE
WESTERN FL 33326



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT 07

4. Date Incorporated or Qualified
To Do Business in Florida

11/19/2002

5. FEI Number

223884229

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
P.	ITZIK BEN-DAYAN	637 HERITAGE DR. WESTON FL.	WESTON FL. 33326
T.	SABINA BEN-DAYAN	637 HERITAGE DR. WESTON FL.	WESTON FL. 33326

400024197824

10/28/03--01032--004 **158.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

BEN-DAYAN, ITSHAC
637 HERITAGE AVE
WESTERN FL 33326

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE

Date

REGISTERED AGENT MUST SIGN

11. 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:

ITZIK BEN-DAYAN
SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/11/03

CR2E040 (7/03)

10/20/03

To Whom it may concern:

The Company of
Prizm Lighting Inc has
been incorporated since
1997 in N.Y. We
were not aware
nor did we receive
(since we incorporated
here in FL in 11/02)
any notice of the
\$150 to keep
our company going
We are sending
in the 150 plus
\$75 (for cert. of
Status

(2)

Please waive the
\$600 for us
since we are a
fairly new business
here in the state of
Florida & we
not notified of
the yearly fee.

Please send
us the needed
yearly forms &
the deadlines.

Thank you
Sabina Bar-Da