192

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
04 DEC 30 PM 1:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REINSTATEMENT 03-04
MRS

DOCUMENT # P02000125572

1. Corporation Name
Palm Advertising, Inc.

738 Regency Reserve Circle
738 Regency Reserve Circle

2. Principal Office Address		3. Mailing Office Address	
738 Regency Reserve Circle		738 Regency Reserve Circle	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
2604		2604	
City & State		City & State	
Naples, FL		Naples, FL	
Zip	Country	Zip	Country
34119	USA	34119	USA

4. Date Incorporated or Qualified To Do Business in Florida 11/25/2002

5. FEI Number 02-0661885 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $6.25 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Andrea J. Stabile

Street Address (P.O. Box Number is Not Acceptable)
738 Regency Reserve Circle

Suite, Apt. #, Etc.
2604

City: Naples | State: FL | Zip Code: 34119

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: Andrea Stabile
REGISTERED AGENT MUST SIGN

Date 11/24/04

CR2E031 (01/04)

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

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PTS/D	Andrea J. Stabile	738 Regency Reserve Circle #2604	Naples, FL 34119

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(5)(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: Andrea Stabile
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/24/04 Date 239-354-1281 Daytime Phone #

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Florida Department of State
Division of Corporations
Public Access System

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CORPORATION REINSTATEMENT

PALM ADVERTISING, INC.

Certificate of Status	0
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