

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1/2

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 DEC 11 PM 12:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000012963

1. Corporation Name

Fann-Tastic Fishing, Inc.

2. Principal Office Address

801 Seabreeze Blvd

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, FL

Zip

33316

Country

USA

3. Mailing Office Address

PO Box 2061

Suite, Apt. #, etc.

City & State

Clewiston FL

Zip

33440

Country

USA

REINSTATEMENT

05/00

4. Date Incorporated or Qualified
To Do Business in Florida

01/25/03

5. FEI Number

04-3740978

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

Brenda K. Fann

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

838 Thacher Blvd

Suite, Apt. #, Etc.

City

Moorehaven

State

FL

Zip Code

33471

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

Brenda K. Fann

REGISTERED AGENT MUST SIGN

Date 12/7/06

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/T	Mark Fann	838 Thacher Blvd	Moorehaven FL 33471
VP/S	Brenda Fann	838 Thacher Blvd	Moorehaven FL 33471

800082453518
12/11/06--01075--006 **300.00

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 contained in Chapter 119, 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:

Mark Fann

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/7/06

Date

95466616811

Daytime Phone #

K. Eckel DEC 11 2006

2/2

Fann-Tastic Fishing
P.O. Box 2061
Clewiston, FL 33440
(954) 661-6911

December 7, 2006

Re: Fann-Tastic Fishing Reinstatement
Document # - P03000012963

To Whom It May Concern:

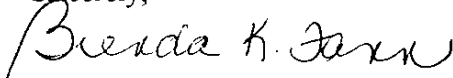
Per our conversation earlier today, I am enclosing this letter regarding the annual report notices.

Due to Hurricane Wilma, not only did we loose all of our corporate records, our house also was destroyed. With all the chaos going on, we did not receive any of the annual report notices sent and the annual report was missed.

I have enclosed a money order in the amount of \$300.00 for reinstatement.

Thank you in advance.

Sincerely,



Brenda K. Fann
Registered Agent
Fann-Tastic Fishing