

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

06 AUG 17 AM 8:30

RECEIVED  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT #**

1. Corporation Name

Trier Media Corporation

FILE#: P03000118286

600078986406  
08/22/06--01019--016 \*\*450.00

2. Principal Office Address

1521 Alton Road

Suite, Apt. #, etc.

#342

City & State

Miami Beach, FL

Zip

33139

Country

USA

3. Mailing Office Address

1521 Alton Road

Suite, Apt. #, etc.

#342

City & State

Miami Beach, FL

Zip

33139

Country

U.S.A.

REINSTATEMENT 104-06

4. Date Incorporated or Qualified  
To Do Business in Florida

10/21/03

5. FEI Number

75-3134035

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

Chris Trier

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

400 Alton Road

Suite, Apt. #, Etc.

Suite 1704

City

Miami Beach

State

FL

Zip Code

33139

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

8/16/06

**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	Chris Trier	400 Alton Road, Suite 1704	Miami Beach, FL 33139

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/16/06

Date

305-531-2320

Daytime Phone #

B. Mitchell AUG 17 2006

**Trier Media**  
c/o Chris Trier  
1521 Alton Road  
#342  
Miami Beach, FL 33139

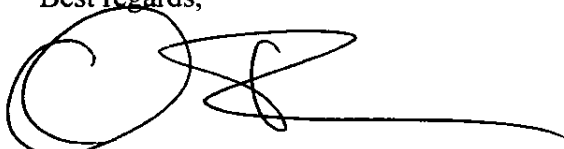
RE: FIC#: P03000118286

To Whom It May Concern:

I never received a postcard in the mail notifying me that I needed to re-file my corporation every year. I spoke to Eula and she informed me that the reinstatement penalty would be waived and all I would have to pay was \$450.00 – which would cover the fees for the past three years.

If you have any questions or concerns, please do not hesitate to call/notify me.

Best regards,

A handwritten signature in black ink, consisting of a large, stylized 'C' followed by a horizontal line and a small loop.

Chris Trier  
P: 305-531-2320  
F: 305-531-0199