

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

pg 1 of 2

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

06 NOV -3 AM 8:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P04000019412**

1. Corporation Name

**NORTHERN MONKEY DESIGN, INC**

2. Principal Office Address **1325  
N.W 11<sup>TH</sup> CRT**

3. Mailing Office Address **1325  
N.W 11<sup>TH</sup> CRT**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State--

**FORT LAUDERDALE F.L.**

City & State

**FORT LAUDERDALE F.L.**

Zip

**33311**

Country

**USA**

Zip

**33311**

Country

**USA**

4. Date Incorporated or Qualified  
To Do Business in Florida

**01 28 04**

5. FFI Number

**27007775**

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

**SPENCER BARKER**

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

**1325 N.W 11<sup>TH</sup> CRT**

Suite, Apt. #, Etc.

City

**FORT LAUDERDALE**

State

**FL**

Zip Code

**33311**

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

**9.20.2006**

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	SPENCER BARKER	1325 N.W 11 <sup>TH</sup> CRT	FORT LAUDERDALE FLORIDA 33311
VP	CHRISTOPHER JONES	111, ISLE OF VENICE	FORT LAUDERDALE 33301
T	BRIGETTE BARKER	1325 NW 11 <sup>TH</sup> CRT.	FORT LAUDERDALE FLORIDA 33311
			800080945108 10/19/06--01009--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:

**SPENCER BARKER**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**09.20.2006**

Date

**954 2708288**

Daytime Phone #

ac 11/06

pg 20F2

## northernmonkeydesign.inc

residential and commercial furniture

1325 N.W 11<sup>th</sup> crt  
Fort Lauderdale F.L  
33311 U.S.A  
Tel : 954.523.9458

Dear Sir / Madame

This letter is to officially state non-receipt of our annual notice for northern monkey design.inc. We did not receive our annual notice for 2005. We are requesting a waiver on the penalty fees but we are sending this letter accompanied with previously discussed past fees of \$300.00 so that we can reinstate our corporation. Thank you .

If you need to contact me in work hours # 954.270.8288 (Spencer Barker, President).

