


2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P05000024816					
1. Entity Name BFISHHOUSE INC					
Principal Place of Business 10374 HOLSBERY ROAD PENSACOLA, FL 32534			Mailing Address 10374 HOLSBERY ROAD PENSACOLA, FL 32534		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BAILEY, STEVEN 10374 HOLSBERY ROAD PENSACOLA, FL 32534			7. Name and Address of New Registered Agent Name <u>Bailey Sylvia</u> Street Address (P.O. Box Number is Not Acceptable) <u>10374 Holsberry Rd</u> City <u>Pensacola</u> FL Zip Code <u>32534</u>		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Sylvia Bailey</u> (NOTE: Registered Agent signature required when reinstating) DATE <u>3-1-07</u>					
FILE NOW!!! FEE IS \$300.00			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BAILEY, STEVEN <input type="checkbox"/> Delete 10374 HOLSBERY ROAD PENSACOLA, FL 32534		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <u>01-16-07 90186 047 \$155.00</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input type="checkbox"/> Delete BAILEY, SYLVIA 10374 HOLSBERY ROAD PENSACOLA, FL 32534		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 200093256382 <u>03/16/07--01017--005 **153.75</u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Sylvia Bailey</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>3-1-07</u> <small>Date Daytime Phone #</small>		

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07 MAR 12 PM 12:37
TALLAHASSEE, FLORIDA



REINSTATEMENT (1/07) 06-07
4. FEI Number 20 2339522 Applied For ☐ Not Applicable ☐

-To Whom it may concern,

Bfishhouse Inc 2006 annual report form was given to me in Jan. 2007 - I did not received notice at any time between Jan - ⁽²⁰⁰⁶⁾ May about a renewal fee. Our accountant made me aware of this in Jan 2007 - Please Re institute the Corporation, accept the \$153.75 & accept an apology -

Thank you,
Sylvia Bailey