

2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED

09 MAR 23 PM 3:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
600146788606



02092009 REIN-P CR2E098 (1/07)

DOCUMENT # P07000110522			
1. Entity Name SEIZE THE DAY INDUSTRIES, INC.			
Principal Place of Business 800 S. OCEAN BLVD. #406 BOCA RATON, FL 33432 US		Mailing Address 800 S. OCEAN BLVD. #406 BOCA RATON, FL 33432 US	
2. Principal Place of Business - No P.O. Box # 800 SOUTH OCEAN BLVD		3. Mailing Address SAME	
Suite, Apt., etc. 406		Suite, Apt., etc.	
City & State BOCA RATON FL 33432		City & State	
Zip 33432	Country PALM BEACH	Zip	Country
4. FEI Number 26-1253948		Applied For Not Applicable	
5. Certificate of Status Desired ☐		8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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>Carina L. Dunlap</u> Asst. Vice President 3/23/09 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$900.00			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIR BROOKS, ANDREW 800 S. OCEAN BLVD., #406 BOCA RATON, FL 33432 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ 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>[Signature]</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Usym Phone #	

3/23/09



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 885441 7611369

AUTHORIZATION :

COST LIMIT :

ORDER DATE : February 6, 2009

ORDER TIME : 9:11 AM

ORDER NO. : 885441-010

CUSTOMER NO: 7611369

DOMESTIC FILINGS

NAME: SEIZE THE DAY INDUSTRIES, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Carina L. Dunlap - Ext# 2951

EXAMINER'S INITIALS _____

RECEIVED
09 MAR 23 AM 11:15
TALLAHASSEE, FLORIDA