

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P35576 DE/FOREIGN PROF

1. Corporation Name
TYLER INTERNATIONAL
MANAGEMENT CORPORATION

Principal Place of Business Mailing Address - SAME
10001 W. OAKLAND PARK BLVD
#101
SUNRISE, FL 33351 US

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable 3. New Mailing Office Address, if Applicable
10251-B W. SAMPLE RD SAME
Suite, Apt. #, etc.

City & State City & State
CORAL SPRINGS, FL
Zip Country Zip Country
33065 US

REINSTATEMENT 98/99

4. Date Incorporated or Qualified To Do Business in Florida
9-19-91
5. FEI Number
22-3127661
Applied For
Not Applicable
6. CERTIFICATE OF STATUS DESIRED ☒ 58.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
PDC	ROGER F. MARSH	12-20 CAMMILE ST.	LONDON, ENGLAND EC2V 7PJ
ST	GORDON GRAHAM	12-20 CAMMILE ST.	LONDON, ENGLAND EC2V 7PJ
D	MICHAEL J. CAIRNS	12-20 CAMMILE ST.	LONDON, ENGLAND EC2V 7PJ

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-09/09/99--01078--003
***908.75 ***908.75

8. Name and Address of Current Registered Agent

HERBERT J. SPIEGEL
10001 W. OAKLAND PARK BLVD
SUITE 101
SUNRISE, FL 33351 US

9. Name and Address of New Registered Agent

Name
EDWARD BROOKS
Street Address (P.O. Box Number is Not Acceptable)
10251-B W. SAMPLE RD
Suite, Apt. #, Etc.
City State Zip Code
CORAL SPRINGS FL 33065

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent Edward Brooks CPA
REGISTERED AGENT MUST SIGN

Date 8/16/99

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes ☒ No ☐

(See other side for information on intangible tax.)

12. 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 under section 119.07(3)(i), 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

Date

Daytime Phone #

9/17/99
171-623-6262