

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
KATHERINE HARRIS
Secretary of State
DIVISION OF CORPORATIONS

AND
FILED

00 MAY -4 PM 1:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000004206

Corporation Name

BRAY INTERNATIONAL PROFESSIONAL SERVICES, INC.

Place of Business

Mailing Address

22 APPELROUTH LANE
KEY WEST, FL 33040

c/o MICHAEL L. BROWNING
402 APPELROUTH LANE
KEY WEST, FL 33040
US

200003253952--2
-05/19/00--01103--028
****300.00 ****300.00

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

New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

Apt. #, etc.

Suite, Apt. #, etc.

State

City & State

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

01/20/93

5. FEI Number

65-0406546

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

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
P	BRAY, JOHN J.		525 PETRONIA ST.		KEY WEST, FL 33040
	BRAY, ELIZABETH J.		525 PETRONIA ST.		KEY WEST, FL 33040
	BROWNING, MICHAEL L.		402 APPELROUTH LANE		KEY WEST, FL 33040
	BOEHM, ROBERT P.		706 10TH STREET		MUKILTEO, WA 98275
	TONY WILLIS		2432 FLAGLER AVENUE		KEY WEST, FL 33040

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PARKS & NILES, P.A.
2432 FLAGLER AVE.
KEY WEST, FL 33040

Name

MICHAEL L. BROWNING

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

402 APPELROUTH LANE

Suite, Apt. #, Etc.

City

KEY WEST

State

FL

Zip Code

33040

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

REGISTERED AGENT MUST SIGN

Date 5-1-00

This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒

No ☐

(See other side for information
on intangible tax)

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

MICHAEL L. BROWNING 5-1-00 (305) 293-8888

Date

Daytime Phone #