

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

142

CORPORATION  **FLORIDA DEPARTMENT OF STATE**
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 DEC 30 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000072910**

1. Corporation Name

TRND-SETTERS INTERNATIONAL, INC.

400009417534
12/09/02--01051--005 **150.00

2. Principal Office Address

2255 GLADES RD

Suite, Apt. #, etc.

324 - ATRIUM

City & State

BOCA RATON FL

Zip

33431

Country

PAIM BCH

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

10/20/93

5. FEI Number

650-44-2244

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

STEVE SARU

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

21659 ABINGTON CT

Suite, Apt. #, Etc.

City

BOCA RATON

State

FL

Zip Code

33428

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

 **Press**

Date **12/3/02**

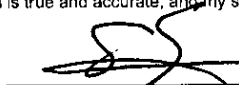
REGISTERED AGENT MUST SIGN

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
Pres	STEVEN SARU	21659 ABINGTON CT	BOCA RATON FL 33428
VP/Sec	JOAN SARU	21659 ABINGTON CT	BOCA RATON FL 33428

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 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:

 **Press**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/3/02

Date

521 483
5370

Daytime Phone #

CR2ED81 (9/01)

Trend-Setters International, Inc.

272

Wednesday, December 04, 2002

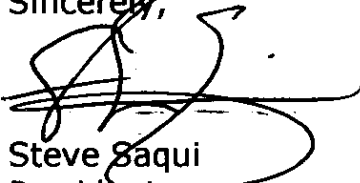
Jim Smith
Florida Department of State
P.O. Box 6327
Tallahassee, FL 32314

Dear Mr. Smith:

I had contacted your office after I was informed by the City of Boca Raton that my Corporation status was inactive. I was told that a renewal notice was sent to my old address at 20423 State Rd. #7 #f-6. On or about 5/15/01 I had moved and sent a forward request to the USPS which never forwarded any mail from your division. I am requesting that the reinstatement fee be waived.

As directed by your office I am enclosing the application for reinstatement and a check for \$150.00 for the Annual report fee and Corporate Supplemental fee. I appreciate your assistance in advance.

Sincerely,



Steve Saqui
President

Fed. ID. 650-44-2244