

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

01 MAY 10 PM 2:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000083543

1. Corporation Name

Sierra Marketing, Inc.

2. Principal Office Address

2639 N. Riverside Dr.

Suite, Apt. #, etc.

Suite 1002

City & State

Hillsboro Shores, FL

Zip

33062

Country

USA

3. Mailing Office Address

2639 N. Riverside Dr.

Suite, Apt. #, etc.

Suite 1002

City & State

Hillsboro Shores, FL

Zip

33062

Country

USA

REINSTATEMENT 94-01

**4. Date Incorporated or Qualified
To Do Business in Florida**

November 29, 1985 **SP**

5. FEI Number

65-0457063

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

Sheila Toby

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

c/o Toby & Company, Inc., 20873 N.W. 9th Court

Suite, Apt. #, Etc.

Suite 102

City

Miami

State
FL

Zip Code

33169-6828

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**

[Signature]

REGISTERED AGENT MUST SIGN

Date 5/9/01

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
P	Alexander B. Mathieson	2639 N. Riverside Dr., Ste. 1002	Hillsboro Shores, FL 33062
S	Alexander B. Mathieson	2639 N. Riverside Dr., Ste. 1002	Hillsboro Shores, FL 33062
T	Alexander B. Mathieson	2639 N. Riverside Dr., Ste. 1002	Hillsboro Shores, FL 33062
D	Alexander B. Mathieson	2639 N. Riverside Dr., Ste. 1002	Hillsboro Shores, FL 33062
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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:

Alexander B. Mathieson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Alexander B. Mathieson, President

5/8/01

Date

754-774-4607

Daytime Phone #