

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris  
Secretary of State

DIVISION OF CORPORATIONS

FILED

01 JAN 16 PM 2:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

PA4000073007

1. Corporation Name

Finner International Co

800003575739--3  
-01/26/01--01015--004  
\*\*\*\*900.00 \*\*\*\*900.00

2. Principal Office Address

5553 Anglers AVE

Suite, Apt. #, etc.

SUITE 109-110

City & State

FT Lauderdale FL

Zip

33312

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

Same

**REINSTATEMENT**

02-01

4. Date Incorporated or Qualified  
To Do Business in Florida

OCT 4, 1994 SP

5. FEI Number

65-0524769

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

Mark Butchen

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

5553 Anglers AVE

Suite, Apt. #, Etc.

109-110

City

FT Lauderdale FL

State

FL

Zip Code

33312

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

Mark Butchen

REGISTERED AGENT MUST SIGN

Date 1/15/01

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
CFO	Mark Butchen	Suite 109-110 5553 Anglers AVE	FT Lauderdale FL 33312
Director	David Hueber	↓	↓
Director	Toshi Omori	↓	↓
Director	TK Akanuma	↓	↓

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:

MARK BUTCHEN  
Mark Butchen - CFO

1/15/01

Date

954 966

5507 (EXT 204)

Daytime Phone #

CR2E081 (9/00)