

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000020989

1. Corporation Name

E.A.S.I., INC.

Principal Place of Business

4100 NE 23RD AVE.
LIGHTHOUSE POINT FL 33064

Mailing Address

4100 NE 23RD AVE.
LIGHTHOUSE POINT FL 33064

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

2. New Principal Office Address, If Applicable

240 SW 34 ST Ft. Lauderdale, FL

Suite, Apt. #, etc.

City & State

Ft. Lauderdale FL

Zip 33315

Country

USA

3. New Mailing Office Address, If Applicable

4250 NE 23 AVE

Suite, Apt. #, etc.

City & State

Lighthouse Point, FL

Zip

33064

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

03/15/1995

5. FEI Number

65-0564183

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 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
P	BYROM, RANDALL	4100 NE 23RD AVE.	LIGHTHOUSE POINT FL 33064
VP	WILLIAM H. BYRON JR	4011 N.E. 23 AVE.	LIGHTHOUSE POINT FL

REINSTATEMENT

98019 B-3/29/99

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-03/30/99 - 01061--015

****900.00 ****900.00

8. Name and Address of Current Registered Agent

BYROM, RANDY
4100 NE 23RD AVE.
LIGHTHOUSE POINT FL 33064

9. Name and Address of New Registered Agent

Name Byrom, Randy
Street Address (P.O. Box Number is Not Acceptable)
4250 NE 23 AVE
Suite, Apt. #, Etc.

City

L.H.P.

State

FL

Zip Code

33064

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

Randall C. Byrom

REGISTERED AGENT MUST SIGN

Date 2-23-99

11. 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)

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:

Randall C. Byrom Pres.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-23-99 961-228-4558

Date

Daytime Phone #

CR2E040 (9/98)