05/05/1999 01:29 · CCRS → 19543404656 NO. 716

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT 97-APR

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

FILED
99 MAY -5 PM 12:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000014175

1. Corporation Name
CONSIGN ME, INC
8935 NW 23RD ST.
CORAL SPRINGS, FL. 33065

100000286805.1--9
-05/07/99--01128--022
****465.00 ****465.00

Principal Place of Business / Mailing Address
8083 W. SAMPLE RD.
CORAL SPRINGS, FL 33065

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

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. Date Incorporated or Qualified To Do Business in Florida: FEB 12, 1996

5. FEI Number: 65-0643447 ☐ 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
PRES	JANET R. MIRANDA	8935 NW 23 ST.	CORAL SPRINGS, FL 33065

VGP 5/5/99

8. Name and Address of Current Registered Agent

JANET R. MIRANDA
8935 NW 23 ST
CORAL SPRINGS, FL 33065

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City | State: FL | Zip Code

CR2E081 (12/98)

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: Janet R. Miranda — Date: 5-4-99
REGISTERED AGENT MUST SIGN

11. This corporation owes 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.

JANET R. MIRANDA

SIGNATURE: Janet R. Miranda — 5-4-99 (954) 340-4654
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MAY 4, 1999

(2)

DEPT of STATE
REINSTATEMENT DEPT

TO WHOM it MAY CONCERN:

PLEASE BE ADVISED THAT MY ANNUAL REPORTS WERE NEVER FORWARDED TO ME FROM ADDRESS THAT I WAS RENTING. THEY WERE DISPOSED of AFTER I MADE ADDRESS CHANGE. I'M ASKING FOR THEM TO WAIVE FEES FOR MY CORPORATION REINSTATEMET. THANKING YOU IN ADVANCE.

JANET MIRANDA-PRES.
CONSIGN ME INC.
8935 NW 23 RD ST
CORAL SPRINGS, FL
33065