


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000031049**

1. Corporation Name

BLUE PARROT BAR, INC.

Principal Place of Business

6121 4 STREET NORTH
ST PETERSBURG FL 33703

Mailing Address

C/O EGO SOUND INC.
29 OSCAR MILL RD
TARBON SPRINGS FL 34689

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

2. New Principal Office Address, If Applicable

6121 4th St N
Suite, Apt. #, etc.

City & State
St Pete FL

Zip
33703

3. New Mailing Office Address, If Applicable

6121 4th St N
Suite, Apt. #, etc.

City & State
St. Petersburg FL

Zip
33703

Country
Pinellas

4. Date Incorporated or Qualified
To Do Business in Florida

04/01/1996

5. FEI Number

59-3372946

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)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DP	GRAINGER, ALAIN	4126 4TH AVE N	ST PETERSBURG FL 33713

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-12/31/01--01040--011

***150.00 ***150.00

8. Name and Address of Current Registered Agent

GRAINGER, ALAIN
4126 4TH AVE N
ST PETERSBURG FL 33713

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

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

REGISTERED AGENT MUST SIGN

Date

11. 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/01)

December 17, 2001

To Whom It May Concern:

I am a new business owner in St. Petersburg. After purchasing the company, I was under the impression that all agencies had been notified. One could imagine my surprise when I received the letter from your offices; this letter came to me on the eleventh month after the previous owners returned from their vacation. As you will see from the enclosed copy, the letter was sent to the previous owner at his address, rather than to myself, the current owner, and the date clearly shows how long it took for me to receive this form.

Therefore, after speaking with a representative from your offices, I am hereby requesting a waiver for the \$750.00, due to the fact that I did not receive the document. However, I am sending a payment of \$150.00 to your office as discussed with your agent, for the corporation fees. I hope this request will be accepted as it is quite difficult to come through with extra funds at this time in our business. Thank you for your time and patience in this matter.

Kind Regards,



Alain H. Grainger
Owner/Operator
President, Blue Parrot Bar