

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAY 23 PM 1:44

DOCUMENT # *P97000022337*

1. Corporation Name

Global Shuttters, Inc.

2. Principal Office Address

6337 17th St. Circle E.

Suite, Apt. #, etc.

3. Mailing Office Address

6337 17th St. Circle East

Suite, Apt. #, etc.

City & State

Sarasota, FL

Zip

34243

Country

USA

City & State

Sarasota, FL

Zip

34343

Country

USA

REINSTATEMENT *98-00*

4. Date Incorporated or Qualified
To Do Business in Florida

3/11/97

5. FEI Number

59-3432291

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

Brandon K. Shoun

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

6337 17th Street Circle East

Suite, Apt. #, Etc.

City

Sarasota, FL

State

FL

Zip Code

34243

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

Brandon K. Shoun
REGISTERED AGENT MUST SIGN

Date *5/18/00*

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
<i>SD</i>	<i>Carol Eldert</i>	<i>4679 Pittenger Drive</i>	<i>Sarasota, FL 34234</i>
<i>PD</i>	<i>Brandon K. Shoun</i>	<i>5380 37th Street North</i>	<i>St. Petersburg, FL 33714</i>

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

Brandon K. Shoun
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BRANDON K. SHOUN

5/18/00
Date

(941) 342-0204
Daytime Phone #

CR2E081 (9/99)