

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katherine H. Harrell
Secretary of State
DIVISION OF CORPORATIONS

182
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 OCT 25 PM 1:17

DOCUMENT # P97000026743

1. Corporation Name

INTERBASE INCORPORATED

Principal Place of Business

Mailing Address

3105 CARDINAL DRIVE
VERO BEACH FL 32963

3105 CARDINAL DRIVE
VERO BEACH FL 32963



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

2. New Principal Office Address, If Applicable

1605 19th Place

3. New Mailing Office Address, If Applicable

P.O. Box 4258

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

03/20/1997

5. FEI Number

65-0736416

Applied For

Not Applicable

City & State

Vero Beach FL

City & State

Vero Beach FL

Zip

32960

Country

US

Zip

32964

Country

US

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	4 City / State / Zip
PD	BALLARD, MARK	3105 CARDINAL DRIVE 1635 Hidden Pearl Place	VERO BEACH FL 32963
VD	WEIBEL, MARK	3105 CARDINAL DRIVE 890 Reef Road	VERO BEACH FL 32963
			100004679241--1 -11/14/01--01084--011 ***150.00 ***150.00
			SP

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Name

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

1605 19th Place

Suite, Apt. #, Etc.

City

Vero Beach

State

FL

Zip Code

32960

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

Mark Weibel

REGISTERED AGENT MUST SIGN

Date

10/22/01

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:

Mark Weibel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/22/01

Date

561-563-9388

Daytime Phone #

CR2040 (8/01)

interbasix
NO MORE WALLS

242
Web Site Development

E Commerce Solutions

Corporate Intranets

Database Solutions

New Media Marketing

Custom Publishing

760 Suite 3, 8th Court,
Vero Beach, Florida 32962
Phone 561-563-9388
Fax 561-563-0312

To Whom it May Concern:

I just received notification (from my ex-landlord) that my corporation has been dissolved. I have not received any notification regarding this matter until last week. All correspondence has been going to an address that we have not been in for at least two years. I called your information line and they mentioned that I should send in the check for \$150.00 with a note of explanation.

Thank you and please change the address to the following:

Interbase
P.O. Box 4258
Vero Beach FL 32964

Sincerely,



Mark Weibel