

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 OCT 28 AM 10:43

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P97000095280

1. Corporation Name

PARADISE FOUND, INC.

REINSTATEMENT 07

800024198388
10/28/03--01035--006 **150.00

2. Principal Office Address

819 SAN CARLOS DRIVE

Suite, Apt. #, etc.

3. Mailing Office Address

819 SAN CARLOS DRIVE

Suite, Apt. #, etc.

City & State

FT. MYERS BEACH, FL

City & State

FT. MYERS BEACH, FL

Zip

33931

Country

USA

Zip

33931

Country

USA

**4. Date incorporated or Qualified
To Do Business in Florida**

11/05/97

5. FEI Number

59-3477065

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

THOMAS WANDERON, E.A.

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

868 106TH AVENUE NORTH

Suite, Apt. #, Etc.

City

NAPLES

State
FL

Zip Code
34108

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

REGISTERED AGENT MUST SIGN

Date

10/20/03

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
DP	LAWRENCE G. ROSS	819 SAN CARLOS DRIVE	FT. MYERS BEACH, FL 33931
VP	JANE ROSS	819 SAN CARLOS DRIVE	FT. MYERS BEACH, FL 33931

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)(l), 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-23-03

Date

238 463 838 2

Daytime Phone #

CR2E081 (10/02)

21 10/31

TAX, ACCOUNTING & FINANCIAL ASSOCIATES, INC.

Thomas Wanderon, EA
Jeffrey R. Lamb, EA
Brian Youngs

October 20, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500
Attn: Custodian of Records

RE: **Paradise Found, Inc.**
Charter No: P97000095280
Date of Incorporation: 11/05/97
2003 Uniform Business Report/Corporate Reinstatement

Dear Custodian:

We are the accounting firm for the above-referenced corporation and we are writing to you in conjunction with our client, Paradise Found, Inc. Please be advised that the corporation did not receive the notices to file the 2003 Uniform Business Report form and have recently discovered that the corporation has been administratively dissolved. As such, we are requesting on behalf of the corporation a waiver of the late fees and request that you accept the enclosed Reinstatement and the annual filing fee in the amount of \$150.00.

Please advise the corporation and my office accordingly.

Thank you for your cooperation.

Sincerely,

Tax, Accounting & Financial Associates, Inc.

Paradise Found, Inc.

BY: 

Thomas Wanderon, E.A.

BY: 

Jane Ross

Enclosures as stated

TW/ld

Cc:

client

868 106th Avenue North
Naples, Florida 34108

Telephone: 239-591-4334

Fax: 239-591-2359