

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

01 OCT 15 AM 8:13

DOCUMENT # P98000016612

1. Corporation Name

SOUTH FLORIDA MARKET RESEARCH SERVICES, INC.

Principal Place of Business

Mailing Address

8415 CORAL WAY, SUITE 201  
MIAMI FL 33155

8415 CORAL WAY, SUITE 201  
MIAMI FL 33155

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

02/23/1998

5. FEI Number

65-0814719

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 3	City / State / Zip 4
D	CUSAC, JOHN	2100 NE SUMMERVILLE CT.	MARIETTA GA 30066

8. Name and Address of Current Registered Agent

CLEARY, CONSTANCE  
8415 CORAL WAY, SUITE 201  
MIAMI FL 33155

9. Name and Address of New Registered Agent

Name

JEAN M. LIGHT

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

8415 CORAL WAY SUITE 201

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33155

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

SIGNATURE REQUIRED  
JEAN M. LIGHT  
REGISTERED AGENT MUST SIGN

Date 10/12/01

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:

SIGNATURE REQUIRED  
JOHN CUSAC  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/12/01

Daytime Phone #

CR2E040 (8/01)

South Florida Research, Inc.

8415 Coral Way, Suite 201

Miami, Florida 33155

Phone: (305) 264-5780

Fax: (305) 264-6419

OCTOBER 12, 2001

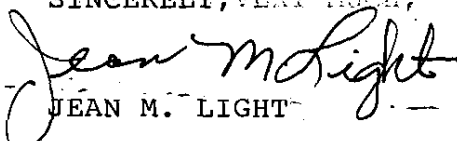
DIVISION OF CORPORATIONS  
ANNUAL REPORT/REINSTATEMENT SECTION  
P. O. BOX 6327  
TALLAHASSEE, FLORIDA 32314

TO WHOM IT MAY CONCERN:

A CHECK AND REPORT WERE MAILED MONTHS AGO, AND TODAY I RECEIVED A NOTICE OF TERMINATION. THE FIRST CHECK HAS NOT BEEN CASHED, SO I AM SENDING A SECOND ONE.

PLEASE BE KIND ENOUGH TO REINSTATE SOUTH FLORIDA MARKET RESEARCH SERVICE, INC.

SINCERELY, VERY TRULY,

  
JEAN M. LIGHT  
REGISTERED AGENT

ENC/