

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Katharine Harris
Secretary of State
DIVISION OF CORPORATIONS

99-01-UBK

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PA0000040706

1. Corporation Name

Timeless Enterprises INC

2. Principal Office Address

3500 N. State Rd 7

Suite, Apt. #, etc.

456

City & State

Fort Lauderdale

Zip

33319

Country

U.S.

3. Mailing Office Address

same

Suite, Apt. #, etc.

City & State

FL

Zip

Country

U.S.

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

65-084-5059

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

Dwetta Hunter

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

3500 N. State Road 7

Suite, Apt. #, Etc.

Suite 456

City

Fort Lauderdale

State

FL

Zip Code

33319

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

Dwetta Hunter

REGISTERED AGENT MUST SIGN

Date

4-08-2001

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
Pres	Dwetta Hunter	3500 N. State Rd 7 #456	
Secretary		Fort Lauderdale, FL	33319
V.P.	ERNEST Hunter	3500 N. State Rd 7 #456	Fort Land, FL 33319
			SP

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:

Dwetta Hunter (Dwetta Hunter) President

Date

4-2-2001 (954) 731-7749

Daytime Phone #