

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000053248

1. Corporation Name

Bright Ideas, Etc., Inc.

2. Principal Office Address

612 S Martin Luther King Jr. Ave

3. Mailing Office Address

612 S. Martin Luther King Jr Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Clwr, FL

City & State

Clwr, FL

Zip

33756

Country

Pinellas

Zip

33756

Country

Pinellas

REINSTATEMENT 03-04

200035717162

05/06/04--01064--003 **900.00

**4. Date Incorporated or Qualified
To Do Business in Florida** 6/15/1998

5. FEI Number
59-3512161

Applied For
☐ **Not Applicable**

6. CERTIFICATE OF STATUS DESIRED ☐

\$2.75 Additional Fee required
for a Certificate of Status.

7. Name and Address of Current Registered Agent

Name

Registered Corporate Agents Inc.

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

612 S. Martin Luther King Jr. Avenue

Suite, Apt. #, Etc.

City

Clearwater

State
FL

Zip Code
33756

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**

[Signature]

REGISTERED AGENT MUST SIGN

Date 4/30/2004

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
P,S	Margaret A Oppenheim	612 S. Martin Luther King Jr. Ave	Clwr, FL 33756

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:

Margaret A Oppenheim

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARGARET A. OPPENHEIM

Date

4-30-04

Daytime Phone #

CR25081 (01/04)