

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 DEC -2 AM 8:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Jim Smith**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT #** P98000075676

1. Corporation Name

Sunset Horizon Inc.

7402000033264

2. Principal Office Address

1706 NW 15th Avenue

3. Mailing Office Address

1706 NW 15th Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Fort Lauderdale, Fl.

City & State

Fort Lauderdale, Fl.

Zip

33311

Country

Broward

Zip

33311

Country

Broward

4. Date Incorporated or Qualified  
To Do Business in Florida

08/27/1998

5. FEI Number

65-0865311

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

Michael J. Sneed

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

3150 Houston Street

Suite, Apt. #, Etc.

City

Ft. Lauderdale

State  
FL

Zip Code

33312

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

*Michael J. Sneed*

REGISTERED AGENT MUST SIGN

Date

11/15/02

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
PD	SNEED, JOSEPH	1706 NW 15TH AVENUE	FORT LAUDERDALE, FL. 33311
VD	SNEED, MICHAEL J.	3150 HOUSTON STREET	FORT LAUDERDALE, FL. 33312
SD	SNEED, SANDRA	3150 HOUSTON STREET	FORT LAUDERDALE, FL. 33312
TD	SNEED, FAITHER	1706 NW 15TH AVENUE	FORT LAUDERDALE, FL. 33311

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:

*Michael J. Sneed*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

11/15/02

Daytime Phone #

CR2E081 (8/01)

js 12/5