

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 NOV -1 PM 2:48

DOCUMENT # P98000100340

1. Corporation Name

ATLANTIC SEA BREEZE INVESTMENTS INC.

Principal Place of Business

Mailing Address

850 OCEAN DRIVE #301
MIAMI BEACH FL 33139

~~850 OCEAN DRIVE #301~~
~~MIAMI BEACH FL 33139~~



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

12/02/1998

5. FEI Number

95-4723401

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Addtional 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)

1	2	3	4
Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres.	Jheryl Busby	C/O Grant, Toni et al. 9100 Wilshire Blvd #1000W	Beverly Hills, CA 90212

500003040265--0
-11/09/99--01089--015
*****150.00 *****150.00

500003040265--0
-11/09/99--01089--016
*****8.75 *****8.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

STONE, ADELE I ESQ.
1946 TYLER STREET
HOLLYWOOD FL 33020

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

REGISTERED AGENT MUST SIGN

Date 10-21-99

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jheryl Busby

Date

10-21-99

310-273-9494

Daytime Phone #

AD

ATLANTIC SEA BREEZE INVESTMENTS INC.

c/o Grant, Tani, Barash & Altman, Inc.
9100 Wilshire Boulevard, Suite 1000W
Beverly Hills, California 90212-3413

October 27, 1999

SENT VIA FEDERAL EXPRESS

Department of State
Division of Corporations
Reinstatement Division
409 East Gaines Street
Tallahassee, Florida 32399

To Whom It May Concern:

As instructed by your office, I am writing this letter as a request for a one time waiver of the reinstatement penalty assessed against Atlantic Sea Breeze Investments Inc. The reason that we did not file the annual report by May 1st is that it was mailed to the company's previous address and was not forwarded. As such, we did not receive the annual report. We are now aware of the filing requirements for annual reports in Florida and are aware that it is our responsibility to meet all deadlines.

Along with this letter I am enclosing the updated annual report along with checks in the amounts of \$150 and \$8.75 to cover the filing fee and certified copy. Thank you for all your help and consideration in this matter.

Sincerely,

ATLANTIC SEA BREEZE INVESTMENTS INC.

By: 
JHERAL BUSBY, President