

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

REINSTATEMENT

FILED

02 NOV -1 AM 10:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000041260

1. Corporation Name

STARDANCER FLORIDA CORP.

Principal Place of Business

150 153RD AVE
SUITE 301
MADEIRA BEACH FL 33708

Mailing Address

1180 HIGHWAY 17
LITTLE RIVER SC 29566

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

05/06/1999

5. FEI Number

57-1107152

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
PD	GRAY, SAMUEL A SR	1180 HIGHWAY 17	LITTLE RIVER SC 29566
STD	GRAY, MARILYN	1180 HIGHWAY 17	LITTLE RIVER SC 29566

6000008759916
11/01/02--01073--004 **150.00

8. Name and Address of Current Registered Agent

HALE, MARION
911 CHESTNUT STREET
CLEARWATER FL 33756

9. Name and Address of New Registered Agent

Name

JACOBS - ARTHUR 1

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

1601 CENTRE ST.

Suite, Apt. #, Etc.

2/F

City

FOUNDAINDA BEACH

State

FL

Zip Code

32234

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/25/02

Date

Daytime Phone #

CR2E040 (8/02)

October 25, 2002



October 25, 2002

Florida Department of Revenue
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

Reg: 2002 Uniform Business Report 57-1107152

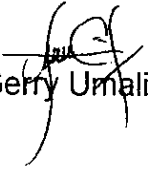
To Whom It May Concern;

We are in receipt of your letter regarding failure to fill our 2002 Uniform Business Forms for our Florida Corporations.

We have received forms stating that our Corporation has been dissolved due to the fact that we have not filled a report for 2002. We were unaware of these forms and have not received any notices or forms before now. It is possible that our former Controller received these forms and failed to fill them before she resigned this year. We are anxious to correct this problem and we are returning the 2002 Annual forms. We are asking that you abate this penalty, as we have filled in a timely manner in previous years and were unaware of the yearly filling.

Thanking you in advance for your attention in this matter .

Sincerely,


Gerry Umali, Controller

State of Florida Department of State

CERTIFICATE OF ADMINISTRATIVE DISSOLUTION OR REVOCATION

The below named corporation having failed to file its 2002 corporation annual report/uniform business report, in accordance with Florida Statutes, is hereby administratively dissolved or revoked effective October 4, 2002.

Corporation Name: STARDANCER FLORIDA CORP

Document Number: P99000041260



Given under my hand and the
Great Seal of the State of Florida,
at Tallahassee, the Capital, this the
4th day of October, 2002.

A handwritten signature in cursive script that reads 'Jim Smith'.

Jim Smith
Secretary of State