

1052


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

04 JAN 22 AM 10:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # *F99000061006*

1. Corporation Name  
*America's Marketing Group, Inc.*

2. Principal Office Address  
*100 S. Andrews Ave.*

3. Mailing Office Address  
*100 S. Andrews Ave.*

City & State  
*Pompano Beach, FL*

City & State  
*Pompano Beach, FL*

Zip Country  
*33069 Broward*

Zip Country  
*33069 Broward*

**REINSTATEMENT 03-04**

4. Date Incorporated or Qualified To Do Business in Florida

5. FEI Number  
*59-3118356*

6. CERTIFICATE OF STATUS DESIRED  \$8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name  
*Edgar L. White*

Street Address (P.O. Box Number is Not Acceptable)  
*6631 NW 61st Ave*

Suite, Apt. #, Etc.

City  
*Parkland*

State  
**FL**

Zip Code  
*33067*

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  
*Edgar L. White*

REGISTERED AGENT MUST SIGN

Date  
*1-21-04*

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
<i>Pres.</i>	<i>Edgar L. White</i>	<i>6631 NW 61st Ave</i>	<i>Parkland, FL 33067</i>

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: *Edgar L. White*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date  
*1-21-04*

Daytime Phone #  
*800-636-5659*

*954-545-9778*

CR2E081 (10/02)



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January 21, 2004

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

To Whom It May Concern:

Due to noted information at the Department of State that Florida Caribbean Marketing (Doc. # V20139) and America's Marketing Group (Doc. # P99000061006) 2003 Uniform Business Reports were returned to you; therefore, all fees to reinstate would be waived. Enclosed is a check for \$300 for each report.

I did not get the ladies name that I talked with, but called back to verify information and spoke with Tyrone Scott.

Thanks for your help.

Sincerely,

A handwritten signature in cursive script that reads 'Joann White'. The signature is written in black ink and is positioned above the typed name.

Joann White  
Bookkeeper