

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

WF2

FILED

00 DEC 27 AM 10:24

SECRETARY OF STATE
TALLAHASSEE FLORIDA

APPLICATION
FOR



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

2000 UPR

DOCUMENT # P99000068921

1. Corporation Name

TOPPSGUY INTERNET MARKETING, INC.

Principal Place of Business

Mailing Address

608 W. HORATIO STREET
TAMPA FL 33606

608 W. HORATIO STREET
TAMPA FL 33606



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

4. Date Incorporated or Qualified
To Do Business in Florida

08/03/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For
Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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
SPT	JOHNSON, DANNY L	608 W. HORATIO STREET	TAMPA FL 33606

000003524460--7
-01/05/01--01019--018
***150.00 ***150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

JOHNSON, DANNY L
608 W. HORATIO STREET
TAMPA FL 33606

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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

Danny L Johnson
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

11/21/00

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

Danny L Johnson
SIGNATURE REQUIRED

Date

11/21/00

Daytime Phone #

KE

CR2E040 (8/00)

2052

TOWNSEND & BRANNON

ATTORNEYS AND COUNSELORS AT LAW

608 W. HORATIO STREET
TAMPA, FLORIDA 33606-2228

ANITA C. BRANNON
DAVID A. TOWNSEND

TELEPHONE (813) 254-0088
FACSIMILE (813) 254-0093

Writer's E MAIL address:
david@townsendbrannon.com

December 13, 2000

Division of Corporations
Annual Report/ Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314-6327

Re: TOPPSGUY INTERNET MARKETING, INC

Dear Sirs:

I submit herewith an application for reinstatement of Toppsguy Internet Marketing, Inc.

The annual report form never reached my client and when I contacted your offices to discuss the matter, it was confirmed to me that your offices had received the annual report form back and were aware of the fact that it was never properly delivered.

Accordingly, in accordance with instructions from your office, I am enclosing a check for \$150.00 and ask that you please reinstate the corporation. I thank you for your assistance in this regard.

Yours truly,



DAVID A. TOWNSEND

DAT:vp
enclosures

- Application for reinstatement
- Check for \$150.00