

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED
02 FEB 25 AM 11:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000070653

1. Corporation Name

FLORIDA PAY ADVANCE

2. Principal Office Address

3835 N. 50th ST.

Suite, Apt. #, etc.

Suite H

City & State

TAMPA, FL

Zip

33619

Country Hillsboro

U.S.A.

3. Mailing Office Address

1601 GLEN AVE.

Suite, Apt. #, etc.

City & State

TAMPA, FL

Zip

33607

Country Hillsboro

U.S.A.

REINSTATEMENT 01-02

4. Date Incorporated or Qualified
To Do Business in Florida

August 2, 1999

5. FEI Number

59-3586667

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

EDWARD G. RADCLIFF

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

1601 N. GLEN AVE

Suite, Apt. #, Etc.

City

TAMPA

State

FL

Zip Code

33607

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****908.75 ****908.75

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

Edward G. Radcliff

REGISTERED AGENT MUST SIGN

Date 2/21/02

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
P	EDWARD G. RADCLIFF	10521 LAKE WILLIAMS DR.	ODESSA, FL 33556
V.P.	BRYAN E. RADCLIFF	2023-C SOUTH CAROLINA AVE	TAMPA, FL 33629
T	JOHN H. CLONTS	926 RIVERHILLS DR.	TEMPLE TERRACE, FL 33617

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:

Edward G. Radcliff

EDWARD G. RADCLIFF

2/21/02

Date

(813) 879-3330

Daytime Phone #

CR2E081 (9/01)