

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 OCT 31 PM 4:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000106813

1. Corporation Name

INTERNET COAST TRAVEL, INC.

Principal Place of Business

2842 BANYAN BLVD CIRCLE NW
BOCA RATON FL 33431

Mailing Address

2842 BANYAN BLVD CIRCLE NW
BOCA RATON FL 33431

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

01/02/2000

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0968089

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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
DPT	BREINER-WYLLIE, LORI	2842 BANYAN BLVD CIRCLE NW	BOCA RATON FL 33431
DVS	WYLLIE, MARK A	2842 BANYAN BLVD CIRCLE NW	BOCA RATON FL 33431

700008734337
10/31/02--01113--012 **750.00

8. Name and Address of Current Registered Agent

WYLLIE, MARK A
2842 BANYAN BLVD CIRCLE NW
BOCA RATON FL 33431

9. Name and Address of New Registered Agent

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

10/20/02

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

Date

Daytime Phone #

10/20/02 561 982-8880

CR2E040 (8/02)



InternetCoastTravel

2842 Banyan Blvd Cir NW

Boca Raton, FL 33431

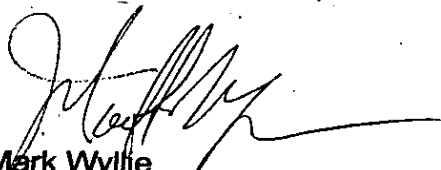
561 982-8880

October 22, 2002

To Whom it may Concern:

Attached is the form and fee for reinstatement. I apologize, I thought we had sent in the original fee, but according to our records we did not. This corporation will be closing at the end of this calendar year, and that is why we had it in a suspend file. Please reinstate us once you receive this. Please call me if you have any questions.

Thank you for your cooperation.


Mark Wyllie

Vice President
InternetCoastTravel