## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

# **APPLICATION FOR** REINSTATEMENT



### FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

DIVISION OF CORPORATIONS

#### P99000108093 DOCUMENT #

1. Corporation Name

#### OUTSIDE INTERESTS, INC.

Principal Place of Business

Mailing Address

1201-62ND-AVENUE, N.-

-4201-62ND-AVENUE: N.

CUITE 12

PINELLAS PARK-FL-33781

SUITE 12 PINELLAS PARK-FL 30781-

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

OUTSIDE Interests In	outside interests inc
J460 121ST Avenue N.	D. A. A. I. II. A.
City & State Largo FL	City & State -Largo - FC
Zip 33773 Country A	Zip 3777 Country

FILED

02 APR 22 PM 5: 22

SECRETARY OF STATE TALLAHASSEE, FLORIDA



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CERTIFICATE	OF STATUS DE	SIRED  S8.7	or a Certit	onal Fee require ficate of Status

Not Applicable

7. Names	and Street Addresses of Each Officer and/or Dire	ector (Florida nonprofit corpora	tions must list at least 3 direc	tors)		
Title(s)	Name of Officers and/or Directors		eet Address of Each licer and/or Director	City / State / Zip		
P	PALERMO, BARBARA	7460 121ST AVEN	NUE NORTH	LARGO FL 33773		
VP	PALERMO, MICHAEL A	7460 121ST AVEN	NUE NORTH	LARGO FL 33773		
				0000054190509 -05/01/0201086=-01-1> ****300.00 ****300.00		
				MM		
	8. Name and Address of Current Registered Agent 9, N.		9. Nam	e and Address of New Registered Agent		
7460 1:	MO, BARBARA C 21ST AVE N FL 33773		Name Barbara  Street Address (P.O. Box) 7460 Suite, Apt. #, Etc.	Jahermo Jumber is Not Acceptable)  I ST Avenue Worth  State Zip Code  FL 33773		

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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.

Registered Agent

REGISTERED AGENT MUST SIGN

Date 4/18/02

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.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

- Barbara Paleimo 4/18/02 (727)
Date 18/02 (727)

Barbara C. Palermo Outside Interests 7460 121<sup>st</sup> Avenue North Largo, FL 33773

April 18, 2002

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

To Whom it May Concern,

Enclosed are the completed application and a check for \$300 to reinstate my for profit Florida corporation; Outside Interests, Inc.

The notice of report due was not received for the year 2001 because of a change in address. Please accept this payment, letter, and application. All information is corrected on the application. Thank you.

Sincerely,

Barbara C. Palermo