

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 22 PM 5:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S65302**

1. Corporation Name

OFFER & ASSOCIATES INTERNATIONAL, INC.

Principal Place of Business

Mailing Address

130 SW 91ST AVENUE
#308
PLANTATION FL 33324

130 SW 91ST AVENUE
#308
PLANTATION FL 33324

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

07/10/1991

5. FEI Number

65-0271430

Applied For

Not Applicable

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)

| 1 Title(s) | 2 Name of Officers and/or Directors | 3 Street Address of Each Officer and/or Director | 4 City / State / Zip |
|---------------|---|--|-------------------------|
| D | OFFER, ROBERT H. | 2945 STATE ROAD 84, SUITE A-1 | FT LAUDERDALE FL |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

700024024217
10/22/03--01067--021 **150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

OFFER, ROBERT H.
2945 STATE ROAD 84
SUITE A-1
FT. LAUDERDALE FL 33312

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

Robert H. Offer pres
REGISTERED AGENT MUST SIGN

Date

Oct 15, 2003

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:

Robert H. Offer pres
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Oct 15, 2003

Daytime Phone #

OFFER & ASSOCIATES

INTERNATIONAL INC.

Custom Yacht Specialist Since 1977

(State Of Florida Yacht Licensed #949)

Oct. 14, 2003

Florida Dept. of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

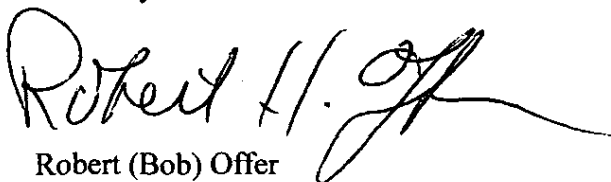
Re: FEI number 65-027-1430

To Whom It May Concern:

As per my telephone conversation with your examiner this is to confirm that we did not receive the Corporation Annual Report/Uniform Business Report form.

We are enclosing the completed Document # S65302 and submitting our check in the amount of \$150.00 to keep our Corporation in good standing.

Sincerely


Robert (Bob) Offer

Bob Offer
130 SW 91st Ave.,
Plantation, Fl. 333wr
USA

Phone: (Cell) 1 (954) 646-5598
Office:) 1 (954) 475-1423
Fax 1 (954) 423-6767
E-mail: bob@offerinc.com