

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED
OCT 10 PM 2:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V3331

1. Corporation Name
AMERICAN SIGHTSEEING, INC.

2. Principal Office Address
160 S. Route 17 North

3. Mailing Office Address
160 S. Route 17 North

4. Date Incorporated or Qualified To Do Business in Florida 4/28/92

5. FEI Number 65-0332986 ☒ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ SB 75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
Corporation Service Company

Street Address (P O Box Number is Not Acceptable)
1201 Hayes St.

City
Tallahassee

State
FL

Zip Code
32301

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0605 or 617.0503, F.S.

Signature of Registered Agent Carla Lomi **Asst. Vice President** Date 10-7-05

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
VP, TR	Ross Kinnear	160 S. Route 17 N.	Paramus, NJ 07652
Sec &	same		
Dir	same		

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)(f), 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: Ross Kinnear **ROSS KINNEAR** 9/13/05 713-286-2015

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Date** **Daytime Phone #**

Florida Department of State
Division of Corporations
Public Access System

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Division of Corporations
Fax Number : (850) 205-0384

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

CORPORATION REINSTATEMENT

AMERICAN SIGHTSEEING, INC.

Certificate of Status	0
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