

102

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

04 MAY -5 PM 6:29

SECRETARY OF STATE
TALLAHASSEE, FLORIDACORPORATION
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V41455

1. Corporation Name

BLEY INCORPORATED

2. Principal Office Address

6001 Bahama Shores Dr. S.

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

St. Petersburg, FL

City & State

Zip

33705

Country

USA

Zip

Country

REINSTATEMENT

00-04

4. Date Incorporated or Qualified
To Do Business in Florida

7/1/1992

5. FEI Number

59-3127791

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐\$3.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

DAVID Bley

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

6001 Bahama Shores Dr. S.

Suite, Apt. #, Etc.

City

St. Petersburg

State

FL

Zip Code

33705

700035255687

05/03/04--01048--005 ***50.00

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0603, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

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, D	David Bley	6001 Bahama Shores Dr. S.	St. Petersburg, FL 33705
S, D	Susan Bley	6001 Bahama Shores Dr. S.	St. Petersburg, FL 33705

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 118.07(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/04 722-823-3652

Date

Daytime Phone #

B

2012

David Bley
Bley Incorporated, Inc.
6001 Bahama Shores Drive South
St. Petersburg, FL 33609

Florida Dept. of State
Secretary of State
Divisions of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Dear Secretary of State:

It has recently come to my attention that I have not filed my UBR report for my corporation, Bley Incorporated since 1999.

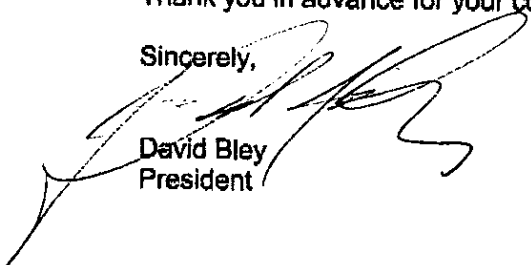
I have not received an annual filing report because the address that is listed for my corporation is not current.

Please waive the \$600 reinstatement fee and accept my check for \$750 to keep my corporation current.

The correct information is on the Corporation Reinstatement form enclosed.

Thank you in advance for your consideration in this matter.

Sincerely,


David Bley
President