F95000004312

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CORPORATION NAME(S) & DOCUMENT NUMBER(S) (If known):

1. Point Blank Body Armor, Inc. (Corporation Name) (Document #)
2. (Corporation Name) (Document #)
3. (Corporation Name) (Document #)
4. (Corporation Name) (Document #)

95 SEP ... PM 2:44
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

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- [ ] FICTICIOUS NAME SEARCH
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	NEW FILINGS
	Profit
	NonProfit
	Limited Liability
	Domestication
	Other

	AMENDMENTS
	Amendment
	Resignation of R.A., Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

	OTHER FILINGS
	Annual Report
	Fictitious Name
	Name Reservation

	REGISTRATION/ QUALIFICATION
✓	Foreign
	Limited Partnership
	Reinstatement
	Trademark
	Other

HOLD FOR PICKUP BY UCC SERVICES

Examiner's Initials	

CR2E031(9/92)

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. POINT BLANK BODY ARMOR INC.

(Name of corporation must include the word "INCORPORATED," "COMPANY," or "CORPORATION" or words or abbreviations of like import in language, as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

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95 SEP -5 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. DELAWARE

(State or country under the law of which it is incorporated)

3. JAN 27 1995

(Date of Incorporation)

4. PERPETUAL

(Duration-Year Corp. will cease to exist or "perpetual")

5. 11-3277312

(Federal Employer Identification number, if applicable)

6. NOT APPLICABLE

(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)

7. 4031 NE 12TH TERRACE OAKLAND PARK, FL 33334

(Current mailing address)

9. Name and Street address of Florida registered agent:

Name: JEFFREY BROOKS

Office Address: 4031 NE 12TH TERRACE

OAKLAND PARK ,Florida 33334

Zip Code

9. **Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered agent's signature: ______________________

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. Names and addresses of officers and/or directors.

A. Directors:

Chairman: JEFFREY BROOKS

Address: 4031 NE 12TH TERRACE OAKLAND PARK, FL 33334

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. Officers:

President: JEFFREY BROOKS

Address: 4031 NE 12TH TERRACE OAKLAND PARK, FL 33334

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

12. ____________________

(Signature of Chairman, Vice Chairman, or any officer listed in number 11 of the application)

13. JEFFREY BROOKS, PRESIDENT AND CHAIRMAN

(Type or print name and capacity of person signing application)

State of Delaware

PAGE 1

Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "POINT BLANK BODY ARMOR INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF SEPTEMBER, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

95 SEP -6 PM 2:45

TALLAHASSEE, FLORIDA

Edward J. Freel, Secretary of State

2475533 8300

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AUTHENTICATION 7627526

DATE 09-01-95

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
96 OCT 18 PM 5:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/28

DOCUMENT # F95000004312

1. Corporation Name
POINT BLANK BODY ARMOR INC.

Principal Place of Business
4031 NE 12TH TERRACE
OAKLAND PARK FL 33334

Mailing Address
4031 NE 12TH TERRACE
OAKLAND PARK FL 33334

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable
Suite, Apt #, etc
City & State
Zip   Country

3. New Mailing Office Address, If Applicable
Suite, Apt #, etc
City & State
Zip   Country

4. Date Incorporated or Qualified To Do Business in Florida: 09/06/1995

5. FEI Number: 11-3277312   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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PCD	~~BROOKS, JEFFREY~~	~~4031 NE 12TH TERRACE~~ 20 RED GROUND RD	~~OAKLAND PARK FL~~ OLD WESTBURY NY 11568
C	BROOKS DAVID	4031 NE 12th TERRACE	OAKLAND PK, FL
D	KREIDELL MARY	4031 NE 12th TERRACE	

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****375.00 ****375.00

8. Name and Address of Current Registered Agent
BROOKS, JEFFREY
4031 NE 12TH TERRACE
OAKLAND PARK FL 33334

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.   Date 10/12/96

Signature of Registered Agent ________ REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes.   Yes ☒ No ☐   (See other side for information on intangible tax.)

12. 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: Mary Kreidell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/12/96
Date   Daytime Phone #

CR2E040 (7/96)   0090436   AF