

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

CORPORATION
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

03 JUL -1 PM 3:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F96-2328

1. Corporation Name

Prinmak International, Inc.

2. Principal Office Address

1250 North Tustin Ave.

3. Mailing Office Address

1250 North Tustin Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Anaheim, CA

City & State

Anaheim, CA

Zip

92807

Country

USA

Zip

92807

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

05/09/96

5. FEI Number
330070547

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒§ 6.75. An original fee is required
for a Certificate of Status.

REINSTATEMENT 03

7. Name and Address of Current Registered Agent

Name

CT Corporation System

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

1200 South Pine Island Road

Suite, Apt. #, Etc.

City

Plantation

State

FL

Zip Code

33324

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent*Connie Bryan*

CONNIE BRYAN

REGISTERED AGENT ASSISTANT SECRETARY

Date

7/1/03

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
D, V	David W. Devonshire	1303 E. Algonquin Road	Schaumburg, IL 60196
D, V, T	Garth L. Milne	1303 E. Algonquin Road	Schaumburg, IL 60196
D, V	Steven J. Strobel	1303 E. Algonquin Road	Schaumburg, IL 60196
S	A. Peter Lawson	1303 E. Algonquin Road	Schaumburg, IL 60196
Asst. S	Ray A. Dybala	1303 E. Algonquin Road	Schaumburg, IL 60196
Asst. S	Carol Forsythe	1303 E. Algonquin Road	Schaumburg, IL 60196

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)(c), 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:

Jim Smith

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/20/03

Daytime Phone

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

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To:

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

From:

Account Name : JOHNSON, BLAKELY, POPE, BOKER, RUPPEL & BURNS, P.A.
Account Number : 076666002140
Phone : (727) 461-1818
Fax Number : (727) 441-8617

CORPORATION REINSTATEMENT

POINT A TO B ENTERPRISES, INC.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$908.75