

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # H79793

1. Corporation Name

CORPORATE APPAREL SERVICES, INC.

Principal Place of Business

Mailing Address

3435 ENTERPRISE AVE.
SUITE 28
NAPLES FL 33942

C/O CJ FELDMANN
3951 GULF SHORE BLVD. N.
NAPLES FL 33940

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

100-203 AVIATION DR
NAPLES FLORIDA
34104

FLORIDA
Collier

REINSTATEMENT

96-97

4. Date Incorporated or Qualified
To Do Business in Florida

10/08/1985

6. FEI Number

59-2604887

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
CD	FELDMANN, CLEMENT J.	3951 GULF SHORE BL #103	NAPLES FL
VSD	FELDMANN, MARY T.	3951 GULF SHORE BLVD.103	NAPLES FL
ART	FELDMANN, THOMAS M.	3951 GULF SHORE BLVD STE 103	NAPLES FL
P	Feldmann, Clement P	100-203 AVIATION DR	NAPLES, FL
			700002234237-75
			07/09/97-07/10/97-005
			****915.00 ****915.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

FELDMANN, CLEMENT J.
3951 GULF SHORE BLVD. N.
403
NAPLES FL 33940

Name
Clement P Feldmann
Street Address (P.O. Box Number is Not Acceptable)
100-203 AVIATION DR
Suite, Apt. #, Etc.
City
NAPLES
State
FL
Zip Code
34104

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.

Signature of
Registered Agent

C. Feldmann
REGISTERED AGENT MUST SIGN

Date 12/11/96

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.

Date 7/4/97 Daytime Phone # 704.890.4444