

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

99 OCT -6 PM 4:38

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **L46437**

1. Corporation Name

PC DOCS Holdings, Inc.

Principal Place of Business

Mailing Address

**REINSTATEMENT 97-99**

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

2. New Principal Office Address, If Applicable

25 Burlington Mall Road  
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

25 Burlington Mall Road  
Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida

January 31, 1990

5. FEI Number

Applied For

☒ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required  
for a Certificate of Status

City & State

Burlington, Mass.

City & State

Burlington, Mass.

Zip

01803

Country

U.S.A.

Zip

01803

Country

U.S.A.

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
D/P	Fred E. Sorkin	1 Sparks Avenue	North York, Ontario M2H 2W1
D	Alan Barry Litwin	1 Sparks Avenue	North York, Ontario M2H 2W1
S/T	Inder P.S. Duggal	1 Sparks Avenue	North York, Ontario M2H 2W1

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-10/25/99--01131--014  
\*\*\*1067.50 \*\*\*1067.50

8. Name and Address of Current Registered Agent

Gail R. Wilson  
124 Marriott Drive  
Suite 203  
Tallahassee, Florida 32301

9. Name and Address of New Registered Agent

Name  
CT Corporation System  
Street Address (P.O. Box Number is Not Acceptable)  
1200 S. Pine Island Road  
Suite, Apt. #, Etc.

City  
Plantation

State  
FL

Zip Code  
33324

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

*Conni Bryan* CONNIE BRYAN  
REGISTERED AGENT MUST SIGN

Date October 06, 1999

11. This corporation owes the current year  
Intangible Personal Property Tax due June 30.

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Inder P.S. Duggal-Secretary

October 6, 1999

Date

Daytime Phone #

CR2001 (12/98)