

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION  
REINSTATEMENT



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

FILED

02 FEB -5 PM 1:14

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000018678

1. Corporation Name

BODYWISDOM, INC.

300004917243--7

-02/13/02--01104--015

\*\*\*\*300.00 \*\*\*\*300.00

2. Principal Office Address

636 Kingsley Avenue

3. Mailing Office Address

636 Kingsley Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orange Park, Florida

City & State

Orange Park, Florida

Zip

32073

Country

United States

Zip

32073

Country

United States

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

59-3836812

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

D' Ambrosio, Kimberly

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

1277 Lake Asbury

Suite, Apt. #, Etc.

City

Green Cove Springs

State

FL

Zip Code

32043

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

REGISTERED AGENT MUST SIGN

Date

1/23/02

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
DPS	D' Ambrosio, Kimberly	1277 Lake Asbury Drive	Green Cove Springs, FL 32043
DVT	Coulon, Cynthia	5135 McPherson Road	Jacksonville, FL 32205

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)(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

Date

(904) 269-1190

Daytime Phone #

# Holt & Associates, P.A.

*Accounting and Tax Services for Small Businesses*

January 14, 2002

Division of Corporations  
Annual Report/Reinstatement Section  
PO Box 6327  
Tallahassee, FL 32314-6327

Dear Sir or Madam:

Enclosed, please find the Application for Reinstatement and 2002 Uniform Business Report for Body Wisdom, Inc., and a check made out to the Department of State for \$300.00 for the 2001 and 2002 filing fees.

Body Wisdom is a new client to us and is was not aware that the annual report must be filed each year. I have explained to them that the report is sent to them each year and it must be sent with the \$150.00 filing fee on or before May 1<sup>st</sup> of each year. They do not recall having received the report or the second notice.

I have explained to them that the Uniform Business Report must be filed each year, and that if it is not filed by May 1<sup>st</sup>, the filing fee increases to \$550.00. Their signatures below indicate that they understand this.

Sincerely,

*Christopher E. Holt*

Christopher E. Holt, EA

*Kim D. Ambrosio*

Kim D. Ambrosio  
President, Secretary, and Director  
Body Wisdom, Inc.

*Cynthia Coulon*

Cynthia Coulon  
Vice President, Treasurer, and Director  
Body Wisdom, Inc.