

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



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

FILED 192

02 JAN 18 PM 1:32

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P000000 48321

1. Corporation Name  
Infinity Consulting Services, Inc.

2. Principal Office Address  
6555 NW 9th Ave 6278 N. Fed Hwy

Suite, Apt. #, etc.

City & State  
Ft Lauderdale FL

Zip Country  
33309 USA

3. Mailing Office Address  
6278 N. Fed Hwy

Suite, Apt. #, etc.

City & State  
Ft Lauderdale FL

Zip Country  
33308 USA

4. Date Incorporated or Qualified  
To Do Business in Florida 5/11/2000

5. FEI Number 65-1007449  
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 Kenneth J Dunn  
Street Address (P.O. Box Number is Not Acceptable) 11575 Heron Bay Blvd  
Suite, Apt. #, Etc. Suite 309  
City Coral Springs  
State FL Zip Code 33076  
900004853199-1  
-02/01/02--0104--023  
\*\*\*\*300.00 \*\*\*\*300.00

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

*[Signature]*

Date 1/16/02

REGISTERED AGENT MUST SIGN

**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
Pres	Jeanne Lealercy	1730 S. Fed Hwy #255	Delray Beach, FL 33483

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

*[Signature]*

Date

1/11/02 9541 489-0169

Daytime Phone #

CR2E081 (9/01)

2012  
6555 NW 9<sup>th</sup> Avenue, Suite 204  
Fort Lauderdale, FL 33309

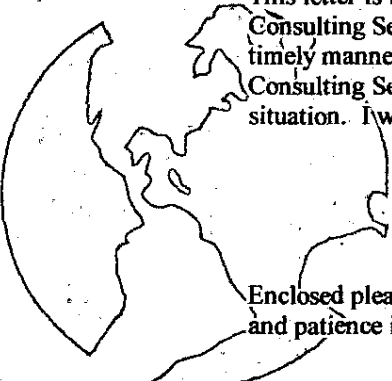
# Infinity Consulting Services

January 16, 2002

Kathy  
Department of Reinstatement Corporation  
409 East Gaines Street  
Tallahassee, FL 32399

Re: Reinstatement

Dear Kathy,



This letter is in regard to the wavier of the late fee for the reinstatement documents. Infinity Consulting Services, Incorporated did not receive this such document and was unable to reinstate in a timely manner. The State of Florida was sending the documents to an address that was not Infinity Consulting Services, Inc. We did not receive such documents that we needed to process to avoid this situation. I would like to give you the correct address for your records:

Infinity Consulting Services, Incorporated  
6555 NW 9<sup>th</sup> Avenue, Suite 204  
Fort Lauderdale, FL 33309

Enclosed please find the reinstatement documents and a check for \$300.00. Thank you for you time and patience in this matter.

Sincerely,



Jeanne Leclercq  
President