

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

03-MAY-5-PM 3:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P00000051344

1. Corporation Name

800 MARKETING FOR SUCCESS, INC.

2. Principal Office Address

8601 Boulder CT.

Suite, Apt. #, etc.

3. Mailing Office Address

8601 Boulder CT

Suite, Apt. #, etc.

City & State

Walled Lake Mi

City & State

Walled Lake M.

Zip

48390

Country

U.S.A.

Zip

48390

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

5-25-2000

5. FEI Number

59-3650659

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

Corp Direct Agents, Inc.

300012963613

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

103 North Meridian Street

Suite, Apt. #, Etc.

City

Tallahassee

State

FL

Zip Code

32301

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 5/5/03

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
Chair	Joseph J. Kucik	8601 Boulder CT	Walled Lake M. 48390
Pres	Joseph J. Kucik	8601 Boulder CT	Walled Lake M. 48390
V-P	Paul D. Kucik	1988 Sir Lancelot Circle	St. Cloud, Florida 34772
Sec	Margaret Mahn	1236 Beth Lane	St. Cloud Florida 34772
Treas	Margaret Mahn		

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:

Joseph J. Kucik

Date

5-1-2003

Daytime Phone #

248-360-5296

CR2E081 (10/02)