

H05000127740 3

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 MAY 19 AM 7:01

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P01000035545
1. Corporation Name
PAN ATLANTIC CONTAINER CORP.

2. Principal Office Address
3401 Beacon Street

3. Mailing Office Address

Suite, Apt. #, etc.

City & State
Pompano Beach, FL

Zip
33062

Country
USA

REINSTATEMENT 02-05

4. Date Incorporated or Due Date To Do Business in Florida
04/06/01

5. FEI Number
65-1094173

6. CERTIFICATE OF STATUS DESIRED

7. Name and Address of Current Registered Agent

Name
JACQUES CAMPEAU

Street Address (P.O. Box Number is Not Applicable)
3401 BEACON STREET


Suite, Apt. #, Etc.

City
POMPANO BEACH

State
FL

Zip Code
33062

8. I, being appointed the registered agent of the above named corporation, do hereby with and accept the obligations of section 807.0505 or 817.0505, F.S.


Signature of Registered Agent  **REGISTERED AGENT MUST SIGN**

Date
5/3/2005

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title	Name of Officer and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
D	JACQUES CAMPEAU	3401 Beacon Street	Pompano Beach, FL 33062

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 807 or 817, 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 817.0401 or 817.0401, F.S., that all taxes owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 115.07(3)(b), 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 TYPE OR PRINTED NAME OF BUSINESS OFFICER OR DIRECTOR**

Date
5/3/05

Daytime Phone #
613-725-7281

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000127740 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)205-0384

From:
Account Name : ADORNO & YOSS, P.A. *ADP*
Account Number : 076247002423
Phone : (954)763-1200
Fax Number : (954)766-7800

CORPORATION REINSTATEMENT

PAN ATLANTIC CONTAINER CORP.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$1,200.00

Electronic Filing Menu

Corporate Filing

Public Access Help

0752

204030.0001

https://efile.sunbiz.org/scripts/efilcovr.exe

5/19/2005