PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. FLORIDA DEPARTMENT OF STATE **APPLICATION** FILFD Jim Smith **FOR** Secretary of State REINSTATEMEN **DIVISION OF CORPORATIONS** 03 JAN 14 AH 9: 14 01000065659 DOCUMENT # SEC LETATY OF STATE TALLALASSEE, FLORIDA 1. Corporation Name INTERNATIONAL CORPORATE DEVELOPMENT SERVICES, IN Principal Place of Business Mailing Address 160 W CAMINO REAL, UNIT 230 160 W CAMINO REAL, UNIT 230 **BOCA RATON FL 33432 BOCA RATON FL 33432** If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 07/03/2001 Suite, Apt. #, etc Suite, Apt. #, etc. 60 N. CAM; 60 W. CAM 5. FEI Number Applied For City & State Not Applicable \$8.75 Additional Fee required CERTIFICATE OF STATUS DESIRED for a Certificate of Status 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each Title(s) and/or Directors City / State / Zip Officer and/or Director **PSTD** MULLIN, THOMAS J 160 W CAMINO REAL, UNIT 230 **BOCA RATON FL 33432** 8. Name and Address of Current Registered Agent 9. Name and Address of New Registered Agent SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is 1840 SW 22 ST, 4TH FLOOR **MIAMI FL 33145** Zip Code State 33*4*3 Z 10. 1, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S. Signature of Registered Agen ERED AGENT MUST SIGN 11. 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 TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## 1/10/2003

Dear Dept of State,

I just received this Dissolution of my Corporation. I called ASAP the number provided and spoke with a Gentleman. I expressed my shock over this event and he told me to immediately send a payment for 300,00.

I did not receive my package back in October or before to pay a filing fee for the state. The only thing I noticed was that the Address say's unit as opposed to # which is required for receipt of mail. Other than that I do not know why this piece of mail never got to me.

This is costing twice what the normal filing fee was I do not slip up on things like this and the only thing I can assume is that because of the Address not being correct, the mail was not received. I have made correction to this application to avoid this at all cost next time.

Thank you for all your help in this matter. This will not happen again.

Best regards,

Thomas J. Mullin President International Corporate Development Services, Inc.

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