SECRETARY OF STATE

03 OCT 15 AM 8:57

## **APPLICATION FOR** REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State DIVISION OF CORPORATIONS

## P01000072325 DOCUMENT #

1. Corporation Name

EULACTOL USA INC.

Principal Place of Business Mailing Addr		ess ess		]			
7300 W CAMINO-REAL 730		-7000 W-CAMII	2000 W CAMINO REAL				
.127		127					<del>                                    </del>
BOCA RATON FL 32423 BOGA RATON		_		REINS	MICWEN	03	
If above addresses are incorrect in any way, line through incorrect in			nformation and enter o	correction below.			*
			ng Office Address, If Applicable  W. CAMINO REAL		4. Date Incorporated or Qualified To Do Business in Florida		
7100 W. CAMINO REAL 7100 Suite, Apt. #, etc. Suite, Apt. #,				- 07/23/2001			
- 119 119				5. FEI Number Applied For		Applied For	
		City & State	- RATON, FL		65-1123910 Not Applicable		
334	Country Country	<sup>Zip</sup> 334	33 Country			OF STATUS DESIRED X	8.75 Additional Fee required 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)							
Title(s)	Name of Officers and/or Directors	852 <u>-</u>		eet Address of Each icer <sub>c</sub> and/or Director		City / 5	State / Zip
D	SHER, STEVEN		7000 W PALMETT	TO PARK ROAD ( ESPRINGS	STE-50	BOCA RATON FL 3345	33428
D	SHER, SHELLEY		7000 W PALMETT	TO PARK ROAD!	STE-50— DA.	BOCA RATON FL 3343	83428
<del></del> -			, , ,		•		
					<del>.</del>	nngagga	
					10/15/	00238283 16-01069-025	** 158.75
8. Name and Address of Current Registered Agent				9. Name and Address of New Registered Agent			
BECKE	RMAN, DAVID M	Name - MERVYN SON E - Street Abdress (P.O. Box Number & Not Acceptable)					
7000 W PALMETTO PARK ROAD STE 500				Street Address (P.O. Box Number is Not Acceptable)  GIUI PINE SPRINGS IR.			2.
BOCA RATON FL 33433				Suite, Apt. #, Etc.			
				City A	Datilal	Sta	

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.

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:

Signature of Registered Agent

MERVYN STONE

REGISTERED AGENT MUST SIGN

10/07/03 (So1)620-8122.



**Eulactol USA, Inc.** 

7100 W. Camino Real, Suite 119 Boca Raton, FL 33433 Phone: 561-620-8122

Fax: 561-620-8308

Divisions of Corporations Annual Report/Reinstatment Section P.O Box 6327 Tallahassee Fl 32314-6327

Subject Eulactol USA Inc

FEI # 65-1123910

To Whom It May Concern,

Enclosed please find payment in respect to the 2003 business filing.

The Uniform Business Report was not received by us as we moved offices in January 2003. It appears it may have been sent to the incorrect address.

Please excuse any penalties as there was certainly no ill intent on our part. We would be very appreciative of a copy of certificate of Status for our records.

We ask that you please refer to changes in our Business information.

Thank you for your time and understanding.

Mervyn Stone

VP of Operations Eulactol USA Inc