

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

182

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P02000132350

1. Corporation Name

CARIBBEAN ISLAND SUPPLIES, INC.

Principal Place of Business

Mailing Address

102 SOUTH FIG TREE LANE  
PLANTATION FL 33317

102 SOUTH FIG TREE LANE  
PLANTATION FL 33317

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

12/18/2002

5. FEI Number

30-0178940

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$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) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip
DIR.	WILSON, JADENE	102 SOUTH FIG TREE LANE	PLANTATION FL 33317

REINSTATEMENT

500027654565  
01/27/04 01017 033 \*\*150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

WILSON, JADENE  
102 SOUTH FIG TREE LANE  
PLANTATION FL 33317

Name

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

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

10. I, 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 Agent

Jadene Wilson

REGISTERED AGENT MUST SIGN

Date

01/23/04

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:

Jadene Wilson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/23/04 9546897217

Date

Daytime Phone #

CR2E040 (7/03)

282

# CARIBBEAN ISLAND SERVICES

DBA

## Drummer, Inc.

Jadene  
Herbert  
Fernando  
Capt. Andy  
Luni

January 20, 2004

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ProSub  
Dive Equipment

SeaDive / Oceanways  
Snorkel Gear

Action plus  
Wetsuits

Pelican Products  
Lights and Cases

National Divers Mfg  
SCUBA Accessories

Sun Searcher  
Pool Floats

Rope  
Nylon, Polypro, Manila  
Polyester, Dacron Line

Lawrence Factor  
X-Pendable Filters  
Oil, NuParts

MaxAir  
Compressors  
Cascade Systems

Stearns  
Ski Jackets & Raingear

Watertoyz  
Sunfish, Windsurf  
Kayaks, WaterSkis

Boats  
Parasail-Dive  
Fish-Catamarans

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Division Of Corporations  
Uniform Business Report Filings  
PO Box 1500  
Tallahassee, Fl. 32302

Good Morning,

I have owned my business for 1 year but I am still learning all of the things that have to be done. I just received a notice saying that my Corporations are being dissolved for non-payment. I am pretty sure that I never received a notice of this before and I am not sure where I would have received the information otherwise. I assume that I also have to make a payment for this year. I would like to make my delinquent payment now and also make the payment for the year 2004. If there is anything else I need to do to clear this up please let me know. I can be reached at 954.689.7217. Thank you very much and have a nice day.

Sincerely,



Jadene Wilson

Caribbean Island Services, Inc. d/b/a **DRUMMER**  
102 South Fig Tree Lane, Plantation, Florida, 33317 U.S.A  
Phone 954-689-7217 ~ FAX 954-689-7207  
E-Mail: [Jadene1313@aol.com](mailto:Jadene1313@aol.com) [DrummerRep13@aol.com](mailto:DrummerRep13@aol.com)