

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2006 SEP 22 PM 2:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # PO4000049639

1. Corporation Name

WORLDWIDE RESPONSE, INC.

2. Principal Office Address

2913 SOUTH GREENLEAF CIR.

Suite, Apt. #, etc.

City & State

BOYNTON BEACH, FL

Zip

33426

Country

USA

3. Mailing Office Address

2913 SOUTH GREENLEAF CIR.

Suite, Apt. #, etc.

City & State

BOYNTON BEACH, FL

Zip

33426

Country

USA

REINSTATEMENT

CR2E081 (12/05)

05-06

4. Date Incorporated or Qualified
To Do Business in Florida

3/28/2004

5. FEI Number

20-1057188

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$5.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

ROLAND C. BURRELL III

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

2913 S. GREENLEAF CIRCLE

Suite, Apt. #, Etc.

City

BOYNTON BEACH

State

FL

Zip Code

33426

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

[Signature]

REGISTERED AGENT MUST SIGN

Date 9/20/06

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
PRESIDENT	ROLAND C. BURRELL III	2913 S. GREENLEAF CIR	BOYNTON BEACH, FL 33426

800080222148
09/27/06--01048--018 **900.00

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 contained in Chapter 119, 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]

ROLAND C. BURRELL III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/20/06

Date

561-736-6667

Daytime Phone #

9/25/06