

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED STATE
SECRETARY OF CORPORATIONS
2002 MAR 12 PM 12:05

DOCUMENT # P 33234

1. Corporation Name

IFPC WORLDWIDE, INC.

2. Principal Office Address

2900 W Atlantic Blvd

Suite, Apt. #, etc.

Suite 200-11

City & State

Pompano Beach FL

Zip
33069

Country
US

3. Mailing Office Address

2900 W. Atlantic Blvd

Suite, Apt. #, etc.

Suite 200-11

City & State

Pompano Beach FL

Zip
33069

Country
US

**4. Date Incorporated or Qualified
To Do Business in Florida**

03/20/1991

5. FEI Number

36-3657011

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

JAMES FRUIN

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

2900 W ATLANTIC BLVD

Suite, Apt. #, Etc.

Suite 200-11

City

Pompano Beach

State

FL

Zip Code

33069

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

James Fruin

REGISTERED AGENT MUST SIGN

Date

1-16-02

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
P/D	James Fruin	5440 N. Cumberland Suite 138	Chicago IL 60656

REINSTATEMENT

2000-2002

LTS 3-20-02

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 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:

James Fruin JAMES FRUIN

Date

1-16-02

Daytime Phone #