

- See letter -

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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 MAY 29 AM 11:23

DOCUMENT # P94000040372

1. Corporation Name

LIFEKEEPERS INTERNATIONAL, INC.

2. Principal Office Address

102 SEAVIEW AVENUE

Suite, Apt. #, etc.

3. Mailing Office Address

445 PARK AVENUE

Suite, Apt. #, etc.

922

City & State

PALM BEACH

City & State

NEW YORK

Zip

33480

Country

US

Zip

10022

Country

US

4. Date Incorporated or Qualified

To Do Business in Florida

05-27-1994

5. FEI Number

65-0498203

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

THOMAS J. CRAFT, JR.

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

102 SEAVIEW AVENUE

Suite, Apt. #, Etc.

City

PALM BEACH

State

FL

Zip Code

33480

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

Thomas J. Craft, Jr.

Date

5/06/03

REGISTERED AGENT MUST SIGN

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	THOMAS J. CRAFT, JR.	102 SEAVIEW AVENUE	PALM BEACH, FL 33480
VP.D	IVO HEIDEN	445 PARK AVENUE, Ste. 922	NEW YORK, NY 10022
S.D	RICHARD RUBIN	445 PARK AVENUE, Ste 922	NEW YORK, NY 10022

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:

Richard Rubin Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-06-03 212-3073210

Date

Daytime Phone #

CR2E081 (10/02)

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LIFEKEEPERS INTERNATIONAL, INC.

445 PARK AVENUE, SUITE 922

NEW YORK, NY 10022

PHONE: 212-307-3210

FAX: 212-307-3209

Florida Department of State
Division of Corporations
Office of Reinstatement
PO Box 6327
Tallahassee, FL 32314

Re: Lifekeepers International, Inc.
P94000040372

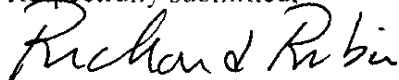
To Whom It May Concern:

The undersigned, recently designated corporate secretary and a director of Lifekeepers International, Inc., requests that the Division of Corporations grant a waiver of the reinstatement fee. The corporation did not receive the notice from the Department of Corporations of the intent to dissolve the corporation because the corporation had changed address and closed its former offices at 931 Village Blvd., 905-168, West Palm Beach, FL 33409. Further, the corporation did not receive the Certificate of Dissolution because of the change of address.

In connection with our review of the corporation's document history on your website, we have determined that the corporation had been dissolved due to a returned check that had been submitted with the 2000 UBR.

Please find the enclosed the Corporation Reinstatement Form for Lifekeepers International Inc. together with a check of \$600, representing the annual fee of \$150 for 2000 through 2003 for the reinstatement of Lifekeepers International, Inc. Our offices within the State of Florida are located at 102 Seaview Avenue, Palm Beach, FL 33480.

Respectfully submitted,



Richard Rubin, Secretary and Director