

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPROVED  
AND  
FILED

97 NOV 10 PM 2:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

APPLICATION  
FOR  
REINSTATEMENT

DOCUMENT # P95000010008

1. Corporation Name  
PRODUCT PARTNERS INC.

Principal Place of Business 6 WHITEHALL WAY BOYNTON BEACH FL 33436	Mailing Address 6 WHITEHALL WAY BOYNTON BEACH FL 33436
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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		4. Date Incorporated or Qualified To Do Business in Florida 02/02/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 65-0556217	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$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)			
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
D	DOYLE, MICHAEL W	6 WHITEHALL WAY	BOYNTON BEACH FL 33436
D	DOYLE, KIMBERLY A	6 WHITEHALL WAY	BOYNTON BEACH FL 33436
			100002345251--8
			-11/12/97--01107--001
			****173.75 ****173.75

B. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
DOYLE, MICHAEL W 6 WHITEHALL WAY BOYNTON BEACH FL 33436		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, Etc.	
		City	State FL

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.

Signature of Registered Agent: *[Signature]* Date: 11/6/97

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes  No  (See other side for information on Intangible tax.)

12. 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: *[Signature]* MICHAEL W DOYLE 11/6/97 (561) 737-0208

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CPCE040 (8/97)

# **PRODUCT PARTNERS**

**INC.**

November 1, 1997

Department of State  
Divisions of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To whom it may concern:

I worked in a large company for many years. After a few years most of the ridiculous procedures we practiced began to appear normal, but every now and then one would still strike me as being outrageous. I am hoping that a \$585 penalty on a corporate renewal bill that neither myself or my secretary has any recollection of ever receiving will strike you as one of these procedures.

I am a small business that is just beginning to turn a profit. A "late fee" of \$585 is more than we can handle at this time.

As instructed by your customer service department I am enclosing a check for the original \$165 plus \$8.75 for a certificate of status.

I realize that this letter will not go to the individuals who make the rules but I am hoping it will get to a reasonable person who has the ability and authority to overturn some of these rules.

Please inform me of your decision.

Sincerely,



Michael W. Doyle

