

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 OCT 10 AM 8:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P95000034401**

1. Corporation Name

ACTION MAIL SERVICES, INC.

Principal Place of Business

Mailing Address

1904 PREMIER ROW
ORLANDO FL 32809
US

1904 PREMIER ROW
ORLANDO FL 32809
US

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

05/02/1995

5. FEI Number

59-3314661

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 4
P	SCOTT, JEFF	1904 PREMIER ROW	ORLANDO FL 32809
VPT	LOMBARDI, KENNETH	1904 PREMIER ROW	ORLANDO FL 32809

500023828155
10/15/03--01069--019 **158.75

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~GARCIA, MARIO A ESQ.
315 E. ROBINSON ST
SUITE #160
ORLANDO FL 32801~~

Name

JEFFREY SCOTT / ACTION MAIL SERVICES

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

1904 Premier Row

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32809

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

Jeffrey Scott
SIGNATURE REQUIRED
REGISTERED AGENT MUST SIGN

Date

10/8/03

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:

JEFFREY SCOTT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10/8/03

Daytime Phone #

407 855 9277

CR20404003

State of Florida Department of State

CERTIFICATE OF ADMINISTRATIVE DISSOLUTION OR REVOCATION

The below named corporation having failed to file its 2003 corporation annual report/uniform business report, in accordance with Florida Statutes, is hereby administratively dissolved or revoked effective September 19, 2003.

Corporation Name: ACTION MAIL SERVICES, INC.

Document Number: P95000034401

Given under my hand and the
Great Seal of the State of Florida,
at Tallahassee, the Capital, this the
19th day of September, 2003.



Glenda E. Hood

Glenda E. Hood
Secretary of State

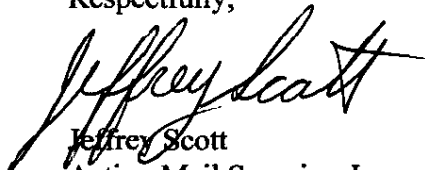
Oct. 8th, 2003

Division of Corporations
Annual Report/Reinstatement Section
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

This is the first time I have received this notification. I would have forwarded the info to the proper agent for signing. I always go through all incoming mail looking for payments so I would have noticed it. The filling fee is nominal and I not have hesitated to pay. Please reinstate my company name: Action Mail Services, Inc.

Respectfully,



Jeffrey Scott
Action Mail Services, Inc.