

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # P95000063464

1. Corporation Name

DAISYTEK LATIN AMERICA, INC.

Principal Place of Business

Mailing Address

~~500 NORTH CENTRAL EXPRESSWAY~~
~~PLANO TX 75074~~

~~500 NORTH CENTRAL EXPRESSWAY~~
~~PLANO TX 75074~~

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

1025 CENTRAL EXPY. SOUTH

Suite, Apt. #, etc.

200

City & State

ALLEN, TX

Zip

75013

Country

USA

3. New Mailing Office Address, If Applicable

1025 CENTRAL EXPY. SOUTH

Suite, Apt. #, etc.

200

City & State

ALLEN, TX

Zip

75013

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

08/16/1995

5. FEI Number

65-0614404

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
<input checked="" type="checkbox"/>	LAYTON, MARK C	500 NORTH CENTRAL EXPRESSWAY	PLANO TX 75074
<input checked="" type="checkbox"/>	ACHUTZ, HARVEY	500 N CENTRAL XPWAY	PLANO TX
V	MITCHELL, RALPH	500 NORTH CENTRAL EXPRESSWAY 1025 CENTRAL EXPY. SOUTH, #200	PLANO TX 75074 ALLEN TX 75013
P	POWELL, JAMES R	500 NORTH CENTRAL EXPRESSWAY 1025 CENTRAL EXPY. SOUTH #200	PLANO TX 75074 ALLEN TX 75013
V	KEARNEY, JACK	1025 CENTRAL EXPY. SOUTH #200	ALLEN TX 75013
S	DOHERTY, RALPH	1025 CENTRAL EXPY. SOUTH #200	ALLEN TX 75013

8. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

9. Name and Address of New Registered Agent

Name

CT Corporation System

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

1200 S. Pine Island Road

Suite, Apt. #, Etc.

500005289475--0

City

Plantation

-04/17/02 State 1134 Code 014

****158.75 ****158.75

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

Connie Bryan

CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY

REGISTERED AGENT MUST SIGN

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Date ****750.00/****750.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

972-887-4700-7245