

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



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

FILED

99 OCT 13 PM 4:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P95000065161**

1. Corporation Name

**BODYGEAR ACTIVEWEAR INC.**

Principal Place of Business

1239 ~~W~~ LAS OLAS BLVD  
FT LAUDERDALE FL 33301  
US

Mailing Address

1239 EAST LAS OLAS BLVD  
FT LAUDERDALE FL 33301

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

2. New Principal Office Address, If Applicable

1239 EAST LAS OLAS BLVD

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Fort Lauderdale, FL

Zip  
33301

Country  
US

City & State

Zip

Country



05/17/99 90039 022 \$150.00

4. Date Incorporated or Qualified  
To Do Business in Florida

08/22/1995

5. FEI Number

65-0602462

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
P	STRADTNER, KEVIN A	200 SE 12 AVE., #109	FT. LAUDERDALE FL <u>33301</u>
V	URQUIJO, CHRISTIUN	200 SE 12 AVE., #109	FT. LAUDERDALE FL <u>33301</u>

8. Name and Address of Current Registered Agent

URQUIJO, CHRISTIUN  
1239 EAST LAS OLAS BLVD  
FT LAUDERDALE FL 33301

9. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, Etc.  
City  
State FL Zip Code

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]  
REGISTERED AGENT MUST SIGN

Date 10-15-99

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: Kevin A. Stradtner]  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

10-15-99

Daytime Phone #

954-525-2525

CR2E040 (8/99)

⑦

OCT. 15 1999

Dear Kathy Hyman,

This letter is in reference to our annual report We submitted and was rejected in May, of 1999 due to signatures for blocks 10 and 11 were needed, which we never received a notice. We just were notified by mail on Oct. 14th 1999 of administrative dissolution of Corp. Annual report; we are re-submitting the annual report with the signature's requested; please reinstate the Corporation

Name BODYGEAR ACTIVEWEAR INC. document number # P95000063161

  
Respectfully  
Christian Urquijo  
Registered Agent

PS. Please send by mail a copy of the reinstatement. Thank You!

1239 East  
Lee Oles Blvd  
Fort Lauderdale  
Florida 33301

Tel: 954/525 2525  
Fax: 954/525 7025

bodygear.com