

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Pamela J. Martin
Secretary
DIVISION OF CORPORATIONS

FILED

98 APR 15 AM 7:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P90000033935

1. Corporation Name FOUR STAR WORLDWIDE SERVICES INC
3500 Park Central Blvd N

Principal Place of Business 3500 PARK CENTRAL BLVD N
POMPANO BEACH, FL 33064

000002491060--6
-04/16/98--01099--004
****315.00 ****315.00

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

DO NOT WRITE IN THIS SPACE

2. New Principal Office Address, if Applicable

3. New Mailing Address, if Applicable

4. Date Incorporated or Qualified
To Do Business in Florida 4-18-1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

65-0665184

Not Applicable

Zip

Country

Zip

Country

CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
P	Todd Pores	3500 Park Central Blvd N Pb	Pompano Beach, FL 33069
T	John N. Natale Jr	3500 Park Central Blvd N	Pompano Beach, FL 33069
VP	Daniel Allen	3500 Park Central Blvd N	Pompano Beach, FL 33069
S	Thomas Laratio	3500 Park Central Blvd N	Pompano Beach, FL 33069

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

KAYE & ROGER, P.A.
6261 N.W. 6th Way
Suite 103
Fort Lauderdale, FL 33309

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

Robert Kaye, President
REGISTERED AGENT MUST SIGN

Date 3-28-98

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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:

John N. Natale Jr 3-28-98 954978-3362
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #