

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

99 OCT 21 AM 10:50

DOCUMENT # P96000068865 (0)

1. Corporation Name
F.O.R.M.E. SYSTEMS INTERNATIONAL, INC.

Principal Place of Business Mailing Address
27910 U.S. Highway 19, N. 27910 U.S. Highway 19, N.
Clearwater, FL 33761 Clearwater, FL 33761

REINSTATEMENT 95

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 8/16/96	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. FEI Number 59-3402917	
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
PST	Evenstad, Kirk	27910 U.S. Highway 19, N.	Clearwater, FL 33761
D	Liberti, Frank E.	27910 U.S. Highway 19, N.	Clearwater, FL 33761
			400003032324--6 -11/02/99--01051--021 ****200.00 ****200.00
			400003032324--6 -11/02/99--01051--022 ****558.75 ****558.75

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
Protonentis, Kenneth G. 1591 Gulf Boulevard Penthouse 2 Clearwater, Florida 34630	Name Liberti, Frank E. Street Address (P.O. Box Number is Not Acceptable) 27910 U.S. Highway 19, N. Suite, Apt. #, Etc. City Clearwater State FL Zip Code 33761

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 *Frank E. Liberti* Date 10/14/99

Frank E. Liberti 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: *Frank E. Liberti*, Director Date 10/14/99 727-723-0040

Frank E. Liberti PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2040 (1/95)