

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

07 APR 30 AM 9:54

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P96000083204

1. Corporation Name

**MATTHEWS, MORRIS & CO., INC.**

300102644453  
05/16/07--01037--007 \*\*450.00

**REINSTATEMENT**

2. Principal Office Address - No P.O. Box #  
2300 Palm Beach Lakes Blvd.

3. Mailing Office Address  
2300 Palm Beach Lakes Blvd.

Suite, Apt. #, etc.  
Ste. 218

Suite, Apt. #, etc.  
Ste. 218

City & State  
West Palm Beach, FL

City & State  
West Palm Beach, FL

Zip  
33409

Country  
USA

Zip  
33409

Country  
USA

4. Date Incorporated or Qualified  
To Do Business in Florida 10/09/1996

5. FEI Number  
650698675

☐ Applied For  
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required  
for a Certificate of Status

**7. Name and Address of Current Registered Agent**

Name  
Corporate Creations Network Inc.

Street Address (P.O. Box Number is Not Acceptable)  
11380 Prosperity Farms Road

Suite, Apt. #, Etc.  
#221E

City  
Palm Beach Gardens

State  
FL

Zip Code  
33410

☒ The reinstatement fee is imposed, except in  
circumstances which the entity did not receive  
the prior notices. By checking this box, you  
are certifying the prior notices were not  
received and requesting the reinstatement  
fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*T. Baer, VP*  
REGISTERED AGENT MUST SIGN

Date 4/27/07

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Christophe Giovannetti	2300 Palm Beach Lakes Blvd. Ste. 218	West Palm Beach, FL 33409
S	Christophe Giovannetti	2300 Palm Beach Lakes Blvd. Ste. 218	West Palm Beach, FL 33409
T	Christophe Giovannetti	2300 Palm Beach Lakes Blvd. Ste. 218	West Palm Beach, FL 33409
D	Christophe Giovannetti	2300 Palm Beach Lakes Blvd. Ste. 218	West Palm Beach, FL 33409

10. 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 contained in Chapter 119, 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: *T. Baer as attorney in fact for Christophe Giovannetti*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4/27/07 365-672-0606  
Daytime Phone #