

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT

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

DOCUMENT # P96000085533

1. Corporation Name

FULFILLMENT INDUSTRIES, INC.

Principal Place of Business  
PO BOX 030353  
FT LAUDERDALE FL 33303

Mailing Address  
PO BOX 030353  
FT LAUDERDALE FL 33303

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

10/14/1996

5. FEI Number

65-0769098

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	STRICKLAND, NEIL	PO BOX 030353 1000 S.E. 4th Street # 211	FT LAUDERDALE FL 33301
D	SWAN, KEVIN	2411 GRANT STREET	HOLLYWOOD FL 33021
			000002341810--6 -11/07/97--01089--014 ****173.75 ****173.75

8. Name and Address of Current Registered Agent

SELZER, JEFFREY SETH  
2400 E COMMERCIAL BLVD  
SUITE 723  
FT LAUDERDALE FL 33308

9. Name and Address of New Registered Agent

Name

Neil Strickland

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

1000 SE 4th Street #

Suite, Apt. #, Etc.

# 211

City

Fort Lauderdale

State

FL

Zip Code

33301

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 11-03-97

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:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-03-97 (954) 527-3432

Date

Daytime Phone #

CR2040 (8/97)



②  
3090 Sheridan Street  
Hollywood, Florida 33021  
(954) 894-2266

Monday, November 03, 1997

Division Of Corporations  
Annual Report/Reinstatement Section  
P.O.Box 6327  
Tallahassee  
FL 32314-6327

To whom it may concern:

I spoke with Leslie Sellers on Monday at approximately 8:45 a.m.. She advised me of the changes I need to make on the enclosed form and suggested I also inform you that when the last time your office mailed another request for changes that I never received it so therefore now I am sending you the correct information requested along with check# 1360 for \$ 173.75

Please make sure that all mail from your office for Fulfillment Industries Inc. come to

Neil Strickland,  
P. O. Box 030353  
Fort Lauderdale, FL  
33303-0353

Phone / Fax (954) 527- 3432

If you have any questions, please contact me at the above address & phone.

Thanks in advance,

A handwritten signature in dark ink, appearing to read 'Neil Strickland', with a stylized flourish at the end.

Neil Strickland  
Secretary/Treasurer

G.C. Kevin Swan  
President