

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED
 04 MAR 31 AM 11:53
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT		 FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000087615			
1. Corporation Name PUFFIN ENTERPRISES INC			
2. Principal Office Address 933 MANDARIN ISLE		3. Mailing Office Address Box 22727	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State FT LAUDERDALE FL		City & State FT LAUDERDALE FL	
Zip 33315	Country USA	Zip 33335	Country USA

03-31-04 01048 003 \$900.00

REINSTATEMENT 99-04

4. Date Incorporated or Qualified To Do Business in Florida 10/22/96	
5. FBI Number 65-0702822	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED ☐	

7. Name and Address of Current Registered Agent	
Name ALVIN KRESSEL	
Street Address (P.O. Box Number is Not Acceptable) 933 MANDARIN ISLE	
Suite, Apt. #, Etc	
City FT LAUDERDALE	State FL
Zip Code 33315	

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 807.0605 or 817.0503, F.S.	
Signature of Registered Agent 	Date 3-29-04
REGISTERED AGENT MUST SIGN	

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
PRES	ALVIN KRESSEL	933 MANDARIN ISLE	FT LAUDERDALE FL 33315

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 807 or 817, 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 807.0401 or 817.0401, 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)(b), 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: 	ALVIN KRESSEL 3-29-04 (954) 522-0554
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date Daytime Phone #

CORP001 (01/04)

Puffin Enterprises Inc.

**Box 22727
Ft Lauderdale FL 33335
Phone (54)522-0554
Fax (954)522-0553
Email : allanlk@aol.com**

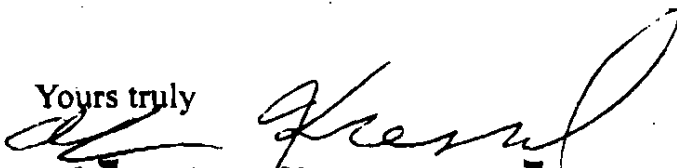
March 30, 2004

**Dept. of State
Division of Corporations
409 East Gaines St
Tallahassee FL 32399**

Ladies:

I am herewith applying for reinstatement of Puffin Enterprises Inc. As I did not receive a reinstatement letter in 1999, I am enclosing a check for \$900.00 and requesting a waiver of the late charges.

Yours truly



Alvin Kressel

President