

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

98 FEB 16 AM 10:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000094381

1. Corporation Name

RELIABLE MARKETING, INC.

Principal Place of Business

1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Mailing Address

1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324



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

2. New Principal Office Address, If Applicable

904 So. State Rd. 7
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

5907 Highgrove
Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

11/14/1996

5. FEI Number

65-0710443

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
P	Michael J Mathx	5907 Highgrove	Grandview, Mo 64030
V	Clyde D Williams	5907 Highgrove	Grandview, Mo 64030
S	Robert M. Verdi	5907 Highgrove	Grandview, Mo 64030

REINSTATEMENT

97-98

11-2-17-98

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-02/17/98--01102--018

***900.00 ***900.00

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

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

Vicky Goldstein
REGISTERED AGENT MUST SIGN

VICKY GOLDSTEIN

SPECIAL ASSISTANT SECRETARY

Date

2/12/98

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:

Robert M. Verdi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/8/98

Daytime Phone #

CR20040 (8/97)