

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

01 JUN 18 PM 12:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P97000036762

1. Corporation Name

DBL Products, Inc.

2. Principal Office Address

1226 NE 4th AVE

Suite, Apt. #, etc.

3. Mailing Office Address

P.O. Box 39372

Suite, Apt. #, etc.

City & State

FT. LAUDERDALE, FL

City & State

FT. LAUDERDALE, FL

Zip

33304

Country

USA

Zip

33309

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

4/24/1997

5. FEI Number

650770850

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

ERIC LAWRENCE

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

1226 NE 4th AVE

Suite, Apt. #, Etc.

City

FT LAUDERDALE

State

FL

Zip Code

33304

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\*\*\*\*900.00 \*\*\*\*900.00

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

*[Signature]*

Date 6-11-01

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
P	ERIC DAVID LAWRENCE	1207 NW 6th AVE	FT LAUDERDALE FL 33314
1/1	RANDALL BLAIR KLETT	2800 NE 4th AVE	FT LAUDERDALE FL 33304
S	MARK S BEERY	800 SOLAR ISLE DR	FT. LAUDERDALE FL 33304

REINSTATEMENT 00-0178

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 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]* RANDALL KLETT  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

6/11/01

Daytime Phone #

954-761-3200

CR2E081 (9/00)