

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED  
FILED

105

CORPORATION



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 APR -4 AM 9:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT #

P97060038247

1. Corporation Name

INTERNATIONAL DOCUMENTATION COURIER, INC

*[Signature]*

2002-2003 UBR

000015315990

04/04/03--01041--024 \*\*150.00

000015315990

04/04/03--01041--023 \*\*150.00

2. Principal Office Address

172 WEST FLAGLER

3. Mailing Office Address

172 WEST FLAGLER STR.

Suite, Apt. #, etc.

325

Suite, Apt. #, etc.

325

City & State

MIAMI

City & State

MIAMI

Zip

33130

Country

USA

Zip

33130

Country

USA

4. Date Incorporated or Qualified  
To Do Business in Florida

1997

5. FEI Number

65-0753121

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$375 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

ADAM LAUFER

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

650 WEST AVE

Suite, Apt. #, Etc.

1509

City

MIAMI BEACH

State

FL

Zip Code

33139

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

3/27/03

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
PR	JOHN PULUMBO	650 WEST AVE, 2901	MIAMI BEACH, FL 33139

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]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/27/03

Date

305-373-5483

Daytime Phone #

CR2E081 (10/02)

2052

INTERNATIONAL DOCUMENT COURIER, INC.

172 W Flagler Street, Suite 325  
Miami, FL 33130

Miami, March 13, 2003

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sirs:

I, the undersigned hereby inform that the Corporation has moved from it's previous address. The UBR Report sent by the Department of State was not received at all, due to the change of address.

Furthermore, the payment nor the UBR report was sent to the Department of Corporation.

It is hereby request a waiver in the amount of penalty charged by the Department of Corporation.

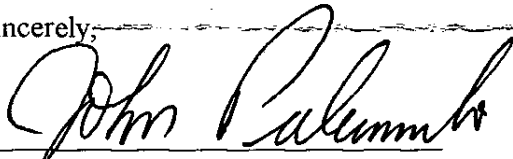
Enclosed you will find a check # 5111 in the amount of \$150.00 dollars for the calendar year of 2002 and a second check # 5112 in the amount of \$150.00 dollars for the calendar year of 2003.

Please take in consideration that this error was done unintentionally and was never intended to cause the Corporation to be Administratively Dissolved.

Please forward all future correspondence to the address listed above.

Thank you for your consideration in this issue and hope that this could be resolve the fastest way possible.

Sincerely,

  
JOHN PALUMBO, Director

CC: JP