

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION FOR REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT #** P97000073145

1. Corporation Name

Independent Sourcing, Inc.

Principal Place of Business

Mailing Address

PMB 288  
 102 N.E. 2nd Street  
 Boca Raton, FL 33432

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

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

4. Date Incorporated or Qualified To Do Business in Florida

8/22/97

Suite, Apt. #, etc.

Suite, Apt. #, etc.  
 PMB 288

5. FEI Number

65-0780066

Applied For

Not Applicable

City & State

City & State  
 Boca Raton, FL

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

Zip

Country

Zip  
 33432

Country

Palm Beach

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          | Heather Halladay                    | 102 N.E. 2nd St., PMB 288   | Boca Raton, FL 33432 |
| VP         | Heather Halladay                    | 102 N.E. 2nd St., PMB 288   | Boca Raton, FL 33432 |
| S          | Heather Halladay                    | 102 N.E. 2nd St., PMB 288   | Boca Raton, FL 33432 |
| T          | Heather Halladay                    | 102 N.E. 2nd St., PMB 288   | Boca Raton, FL 33432 |
|            |                                     |   |                      |
|            |                                     |   |                      |

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Heather Halladay  
 102 N.E. 2nd St.  
 PMB 288  
 Boca Raton, FL 33432

Name

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

Suite, Apt. #, Etc.

City

State  
**FL**

Zip Code

CR2E01 (12/98)

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

*Heather Halladay*  
 REGISTERED AGENT MUST SIGN

Date

6/30/99

11. This corporation owes 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:

*Heather Halladay*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(954) 422-5570

Date

Daytime Phone #

REINSTATEMENT 08-99

99 JUL -6 AM 11:03

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

4000002936654--5  
 -07/20/99--01078--022  
 \*\*\*\*900.00 \*\*\*\*900.00