

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION  
FOR  
REINSTATEMENT**

**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Mortham**  
**Secretary of State**  
**DIVISION OF CORPORATIONS**

**DOCUMENT # P97000098843**

1. Corporation Name

**COMPETITIVE EDGE OUTSOURCING INC.**

Principal Place of Business	Mailing Address
100 PALM AVE #2 6557 Donald Ross Rd JUPITER FL 33477 Palm Beach Gardens FL 33418	100 PALM AVE #2 6557 Donald Ross Rd JUPITER FL 33477 Palm Beach Gardens FL 33418

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
Suite, Apt. #, etc. 1615 Cypress Dr 6557 Donald Ross Rd City & State Jupiter FL Palm Beach Gardens FL Zip 33418 Country	Suite, Apt. #, etc. 1615 Cypress Dr 6557 Donald Ross Rd City & State Jupiter FL Palm Beach Gardens FL Zip 33418 Country

FILED

99 JUN 21 PM 4:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**REINSTATEMENT 98-99**

4. Date Incorporated or Qualified To Do Business in Florida	11/17/1997	SP
5. FEI Number	65-0803011	Applied For Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
D	GRIFFEN, KEITH	800 PINEWOOD AVE 1810 SW Cycle Street	ROCKLEDGE FL 32965 Port St. Lucie FL 34953
D	HAINES, DEAN	3054 FALEHN DRIVE	COURTLAND OH 44410
D	MILLER, MICHAEL	3115 KINGSTON CT 6557 Donald Ross Rd	Palm Beach Gardens FL WEST PALM BEACH FL 33477 33418
D	DONATO, SAL	130 PALM AVE #2	JUPITER FL 33477

9000002915049--8  
-06/25/99--01003--001  
\*\*\*\*900.00 \*\*\*\*900.00

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
DONATO, SAL 130 PALM AVE #2 JUPITER FL 33477	Name Michael Miller Street Address (P.O. Box Number is Not Acceptable) 6557 Donald Ross Rd Suite, Apt. #, Etc. City Palm Beach Gardens State FL Zip Code 33418

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 *[Signature]*  
REGISTERED AGENT MUST SIGN

Date 3-12-99

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: *[Signature]* Michael J. Miller 312-99 567-7742  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #