

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Tim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

02 OCT 29 AM 10:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P97000099242

1. Corporation Name

INNOVATION IN BEVERAGE PACKAGING, INC.

Principal Place of Business

4704 RIO POCO COURT  
NAPLES FL 34109  
US

Mailing Address

4704 RIO POCO COURT  
NAPLES FL 34109  
US

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

11/18/1997

5. FEI Number

65-0797250

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	4 City / State / Zip
P	WEGGEMAN, PETER J	4704 RIO POCO COURT	NAPLES FL 34109

8. Name and Address of Current Registered Agent

WEGGEMAN, PETER J  
4704 RIO POCO COURT  
NAPLES FL 34109

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. or 617.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date OCT. 26, 2002

11. 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PETER J. WEGGEMAN

PRES. OCT. 26, 2002

Date

Daytime Phone #

259-254-9426

11/15/02

CR2E040 (9/02)

OCT 25, 2002.

PETER J. WEGGEMAN  
Innovation in Beverage  
Packaging, Inc.  
4704 Rio POCO Court  
Naples FL 34109 USA

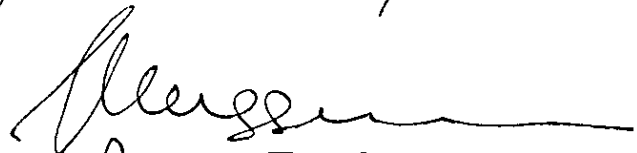
To: FLORIDA Department of State,  
Dear Sir or Madam,

My company did not receive the  
two prior uniform business report  
notices and I would therefore  
like to waive the reinstatement fee.

I enclose a check for the  
appropriate refiling fee of \$150.00 for  
a for-profit corporation.

Thank you for your  
assistance in this matter.

Yours Truly



PETER J. WEGGEMAN  
PRESIDENT.