

H00000015115

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APPLICATION
FOR
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONSFILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 APR 6 AM 7:24

DOCUMENT # P98000038960

1. Corporation Name

North Pacific Enterprises, Inc.

Principal Place of Business

Mailing Address

REINSTATEMENT

99-00

2. Principal Place of Business

21 P/O MITCHELL A. SHERMAN, P.A.

2a. Mailing Address

26 c/o Jeffrey Papell

3. Date Incorporated or Qualified

04/28/1998

3a. Date of Last Report

4. FEI Number

Applied For

☒ Not Applicable

Suite, Apt. #, etc.

22 301 YAMATO RD, STE 1200

Suite, Apt. #, etc.

27 300 Meridian Ave. #6

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

City & State

23 Boca Raton FL

City & State

28 Miami Beach FL

6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees

Zip

24 33431

County

25

Zip

29 33139

County

30

8. This corporation has liability for intangible tax under
s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MITCHELL A. SHERMAN, P.A.
301 YAMATO RD, STE 1200
Boca Raton, FL 3343181 Name
Jeffrey Papell82 Street Address (P.O. Box Number is Not Acceptable)
300 Meridian Ave. #6

83

84 City
Miami Beach

FL

85 Zip Code
33139

11. Pursuant to the provisions of Sections 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Jeffrey Papell; Andreas M. Kelly, attorney-in-fact

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Director
Ingo Farmont
c/o Jeffrey Papell
300 Meridian Ave. #6
Miami Beach, FL 33139 ☐ DELETE1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
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NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13, or on an attached sheet with an address.

SIGNATURE Ingo Farmont

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/4/00

AD

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Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850) 922-4004

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (305) 672-0686
Fax Number : (305) 672-9110

CORPORATION REINSTATEMENT

NORTH PACIFIC ENTERPRISES, INC.

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