

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
01 OCT 29 PM 1:42

DOCUMENT # P98000082609

1. Corporation Name

I.G.I., INC.

Principal Place of Business

Mailing Address

1065 FAIRFAX CIRCLE, WEST  
BOYNTON BEACH FL 33462

1065 FAIRFAX CIRCLE, WEST  
BOYNTON BEACH FL 33462



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.  
639 E Ocean Ave 107

Suite, Apt. #, etc.  
C/O PBS  
9600 W Sample Rd 304

City & State  
Boynton Beach FL

City & State  
Coral Springs FL

Zip  
33435

Country  
USA

Zip  
33065

Country  
USA

4. Date Incorporated or Qualified To Do Business in Florida

09/23/1998

5. FEI Number

59-3543726

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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
DP	LEHNERT-DAVIS, JILL	1065 FAIRFAX CIRCLE, WEST	BOYNTON BEACH FL 33462
DV	DAVIS, KEVIN	1065 FAIRFAX CIRCLE, WEST	BOYNTON BEACH FL 33462
			000004685010--3
			-11/16/01--01046--001
			****150.00 ****150.00
			AWM

8. Name and Address of Current Registered Agent

GOLDSTEIN, LISA KLINE ESQ.  
1750 UNIVERSITY DRIVE  
SUITE 126  
CORAL SPRINGS FL 33071

9. Name and Address of New Registered Agent

Name  
Kevin Davis  
Street Address (P.O. Box Number is Not Acceptable)  
639 E Ocean Ave  
Suite, Apt. #, Etc.  
107  
City  
Boynton Beach  
State  
FL  
Zip Code  
33435

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  
REGISTERED AGENT MUST SIGN

Date

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

Date

Daytime Phone #

CR2ED40 (8/01)

# Professional Business Solutions

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The Bottom Line Experts

October 20, 2001

Division of Corporations  
Annual Report/Reinstatement Section  
PO Box 6327  
Tallahassee, FL 32314-6327

Re: IGI, Inc.

Dear Sir or Madam:

Please see the enclosed annual report. We have included a check for \$150. We ask that you waive the associated late filing penalty.

IGI has had several problems in the past year. IGI's most trusted employee and manager has been recently fired due to severe negligence. Several important documents went unfiled and/or unaddressed during 2001. There is not doubt that the annual report was one of them. We have changed the mailing address to our office so that we can be assured that the report will be filed in a timely manner next year.

Additionally, please note that because of the above situation, both the business location and registered agent have been changed.

We await your response.

Sincerely,



Concetta Lupardo