

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

FILED

01 FEB 27 PM 4:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000019518

1. Corporation Name

QUIXINET, INC.

Principal Place of Business

Mailing Address

~~1299 EAST COMMERCIAL BLVD., SUITE 200~~
~~FORT LAUDERDALE FL 33334~~

~~1299 EAST COMMERCIAL BLVD., SUITE 200~~
~~FORT LAUDERDALE FL 33334~~



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

REINSTATEMENT

0001

2. New Principal Office Address, If Applicable

2000 West Commercial Blvd.

Suite, Apt. #, etc.

Suite 133

City & State
Fort Lauderdale FL

Zip

33309

Country

USA

3. New Mailing Office Address, If Applicable

2000 West Commercial Blvd.

Suite, Apt. #, etc.

Suite 133

City & State
Fort Lauderdale FL

Zip

33309

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

03/02/1999

5. FEI Number

65-0899350

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)

100003803504-0

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City, State, Zip
D	JOHNSON, KEVIN	1299 EAST COMMERCIAL BLVD.	FORT LAUDERDALE FL 33334
D	OKEFFE, WILLIAM	1299 EAST COMMERCIAL BLVD.	FORT LAUDERDALE FL 33334
D	SMAPLEY, PATRICK	1299 EAST COMMERCIAL BLVD.	FORT LAUDERDALE FL 33334
P/D	Johnson, Kevin D.	Suite 133 2000 West Commercial Blvd.	Fort Lauderdale FL 33309
D	O'Keefe, William J.	2000 West Commercial Blvd. Suite 133	Fort Lauderdale, FL 33309
D	Sampley, Patrick	2000 West Commercial Blvd. Suite 133	Fort Lauderdale, FL 33309

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~BUSINESS FILINGS INCORPORATED~~
~~1 EAST BROWARD BLVD.~~
~~SUITE 700~~
~~FORT LAUDERDALE FL 33301~~

Name

Kevin D. Johnson

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

2000 West Commercial Blvd.

Suite, Apt. #, Etc.

Suite 133

City

Fort Lauderdale

State

FL

Zip Code

33309

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 2/23/01

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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kevin D. Johnson

2/23/01

Date

954-938-2092

Daytime Phone #

CR2E040 (8/00)