

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 # S67826

1. Corporation Name

MULTIPLE PLATFORM SOLUTIONS, INC.

Principal Place of Business

4970 MARINA PALMS DR.
PORT RICHEY FL 34668

Mailing Address

4970 MARINA PALMS DR.
PORT RICHEY FL 34668

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

2. New Principal Office Address, If Applicable

1401 So. Palmetto Ave

Suite, Apt. #, etc.

614

City & State

Daytona Bch. FL

Zip

32114

Country

U.S.

3. New Mailing Office Address, If Applicable

1401 So. Palmetto Ave

Suite, Apt. #, etc.

614

City & State

Daytona Bch. FL

Zip

32114

Country

U.S.

FILED

98 JAN 13 AM 10:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT 97

4. Date Incorporated or Qualified
To Do Business in Florida

07/22/1991

5. FEI Number

65-0276102

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
MCP VP	HURST, DEBORAH G	4970 MARINA PALMS DR.	PORT RICHEY FL 34668
MCP	Hurst, Robert	1401 So. Palmetto Ave. #614	Daytona Bch. FL 32114
			500002401805-- R -01/15/98--01078--011 ***750.00 ***750.00

8. Name and Address of Current Registered Agent

HURST, DEBORAH
4970 MARINA PALMS DR.
PORT RICHEY FL 34668

9. Name and Address of New Registered Agent

Name

Hurst, Robert

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

1401 So. Palmetto Ave.

Suite, Apt. #, Etc.

614

City

Daytona Bch.

State

FL

Zip Code

32114

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

Robert M. Hurst

REGISTERED AGENT MUST SIGN

Date 12/30/97

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:

Robert M. Hurst

Robert Hurst

12/30/97

904 239 5959

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR20040 (8/97)