

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT		FLORIDA DEPARTMENT OF STATE Sandra P. Mortham Secretary of State DIVISION OF CORPORATIONS		1050.00 reinst 17.50 2 cus's <hr/> 1067.50
DOCUMENT # 521452 1. Corporation Name STEINBERG & SLEWETT, P.A.		<div style="transform: rotate(-45deg); font-weight: bold; font-size: 1.2em;"> 98 MAR 11 AM 11:14 FILED SECRETARY OF STATE TALLAHASSEE, FLORIDA </div>		
Principal Place of Business Mailing Address 767 Arthur Godfrey Rd. SAME Miami Beach, FL 33140				
If above addresses are incorrect in any way, line through incorrect information and enter correction below.				
2. New Principal Office Address, If Applicable N/A Suite, Apt. #, etc. City & State Zip Country		3. New Mailing Office Address, If Applicable N/A Suite, Apt. #, etc. City & State Zip Country		4. Date Incorporated or Qualified To Do Business in Florida 12/30/76 5. FEI Number 59-1707789 Applied For Not Applicable 6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$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 (Do NOT Use Post Office Box Numbers)	City / State / Zip	
1	2	3	4	
P/D	Paul B. Steinberg	767 Arthur Godfrey Rd.	Miami Beach, FL 33140	
8. Name and Address of Current Registered Agent				
9. Name and Address of New Registered Agent				
Paul B. Steinberg 767 Arthur Godfrey Road Miami Beach, FL 33140			Name VS MAR 16 1998 Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, Etc. City State Zip Code <div style="text-align: right;">FL</div>	
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 3/6/98	
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Paul B. Steinberg, President			Date 3/6/98 Daytime Phone # 538-2344	

CR2E040 (1/98)