

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
 J. B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

1997 NOV 12 AM 10:05

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # K61149

1. Corporation Name

ANTHONY R. MASILOTTI INSURANCE AGENCY, INC.

Principal Place of Business

1246 ROYAL PALM BEACH BLVD.
 ROYAL PALM BEACH FL 33411

Mailing Address

1246 ROYAL PALM BEACH BLVD.
 ROYAL PALM BEACH FL 33411

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

4. Date Incorporated or Qualified To Do Business In Florida

01/26/1989

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

65-0122021

Applied For

Not Applicable

City & State

City & State

Zip

Country

Zip

Country

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 (Do NOT Use Post Office Box Numbers)	City / State / Zip
DPS	MASILOTTI, ANTHONY R.	1246 ROYAL PLM. BCH. BLV	ROYAL PALM BCH. FL
T	MASILOTTI, ANTHONY R.	1246 ROYAL PLM. BCH. BLV	ROYAL PALM BCH. FL

300002346723--3
 -11/13/97--01085--011
 ***165.00 ***165.00

8. Name and Address of Current Registered Agent

MASILOTTI, ANTHONY R
 1246 ROYAL PALM BEACH BLVD.
 ROYAL PALM BEACH FL 33411

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
 FL

Zip Code

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

Anthony R. Masilotti

REGISTERED AGENT MUST SIGN

Date 10-27-97

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:

Anthony R. Masilotti
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-27-97

Date

561-793-8900

Daytime Phone #

CR2E040 (8/97)



ANTHONY MASILOTTI
MAYOR

VILLAGE OF *Royal Palm Beach* FLORIDA

10/27/97

As per our recent phone conversation please accept this as my written explanation which you desired.

As we discussed I had completed my "corporate renewal" and mailed it with the payment due in a timely fashion as prescribed by the department of State. When I received my "second notice" I phoned the "division of corporations" and explained that it had already been done, (and I also called my bank to verify that the payment had not yet "cleared" my bank). A very nice young lady at the division of corporation told me that "they were backed up with processing the renewals and I would be notified if there were any problems".

That being done, I recently received a "notice of dissolution" and again called the division of corporation, at this time I was told to resubmit the payment of \$165.00 along with this letter of explanation and my reinstatement would be processed.

Please contact me at my business phone (561-793-8900) if there are any other problems.

Anthony Masilotti