

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 DEC 12 AM 8:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P00000084441**

1. Corporation Name

JOYCE MARIE RISI, PA.

Principal Place of Business

Mailing Address

3551 PALLADIAN CIRCLE
DEERFIELD BEACH FL 33442

3551 PALLADIAN CIRCLE
DEERFIELD BEACH FL 33442

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.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

09/05/2000

5. FEI Number

65-1037438

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required
for a Certificate of Status

REINSTATEMENT 03



800025455338

12/12/03-01040-013 **150.00

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	4 City / State / Zip
DP	RISI, JOYCE MARIE	9149H SW 21ST COURT	BOCA RATON FL 33428
VP	GYURTSAK, GEORGE	1441 SE 15 CT #101	DEERFIELD BEACH FL 33441
S	LANDENBERGER, FREDERICK	101 NE 19 AVE #126	DEERFIELD BEACH FL 33441

8. Name and Address of Current Registered Agent

RISI, JOYSE MARIE
9149H SW 21ST COURT
BOCA RATON FL 33428

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

CR2E040 (7/03)

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. or 617.0505, F.S.

Signature of
Registered Agent

Joyce Marie Risi
REGISTERED AGENT MUST SIGN

Date 12-10-2003

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)(f), 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:

Joyce Marie Risi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12-10-2003

Daytime Phone #

954-360-9200

December 10, 2003

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

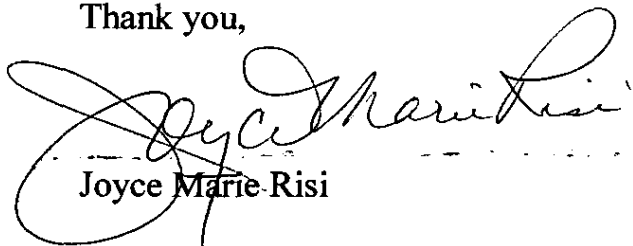
Dear Sirs,

Please accept this letter and check as request for Re-instatement of 2003 Corporation for Joyce Marie Risi, PA.

Due to the fact that I own two homes, the 2003 Uniform Business Report was never received at the proper location.

If you have any other questions, please do not hesitate to call me at 954-360-9200.

Thank you,



Joyce Marie Risi