

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

03 MAY 29 PM 12:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 522889

1. Corporation Name

B.L. SCHWARTZ INVESTMENTS, INC.

REINSTATEMENT 02-03

500020048075  
05/28/03--01077--014 \*\*900.00

2. Principal Office Address

233 South Wacker Drive

Suite, Apt. #, etc.

Sears Tower, Suite 5800

City & State

Chicago, IL

Zip

60606

Country

U.S.A.

3. Mailing Office Address

233 South Wacker Drive

Suite, Apt. #, etc.

Sears Tower, Suite 5800

City & State

Chicago, IL

Zip

60606

Country

U.S.A.

4. Date Incorporated or Qualified  
To Do Business in Florida

01/03/1977

5. FEI Number

391261594

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

John S. Bohatch, Esquire

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

2600 Douglas Road, PM-8

Suite, Apt. #, Etc.

Penthouse 8

City

Coral Gables, FL

State

FL

Zip Code

33134

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

Date 05/22/03

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Donald L. Schwartz	233 South Wacker Drive Suite 5800	Chicago, IL 60606
VP	James E. Schwartz	233 South Wacker Drive Suite 5800	Chicago, IL 60606
S	Donald L. Schwartz	233 South Wacker Drive Suite 5800	Chicago, IL 60606
T	Donald L. Schwartz	233 South Wacker Drive Suite 5800	Chicago, IL 60606

10. 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:

Donald L. Schwartz  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/21/03 (305) 442-4944  
Date Daytime Phone #

CR2001 (10/02)

21 5130