DOCUMENT # 577709

1. Entity Name

LEWIS, VEGOSEN, ROSENBACH & SILBER, P.A.

FILED

00 DEC 11 PM 2:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dean Vegosen
Lewis, Vegosen, Rosenbach & Silber, P.A
1617 N. Flagler Drive, 9A
West Palm Beach, FL 33407

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West Palm Beach, FL 33407

2. Principal Place of Business

Dean Vegosen
Lewis, Vegosen, Rosenbach & Silber, P.A
1617 N. Flagler Drive, 9A
West Palm Beach, FL 33407

3. Mailing Address

Apt. #, etc.

State

Country

DO NOT WRITE IN THIS SPACE

REINSTATEMENT

1000

4. FEI Number
59-1833137

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

VEGOSEN, DEAN (ESQ.)

Dean Vegosen
Lewis, Vegosen, Rosenbach & Silber, PA
515 North Flagler Dr, 18th Floor
West Palm Beach, FL ~~33402~~ 33401

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

8. TI e of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Dean Vegosen 12/6/00

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteri

FILE NOW!!! FEE IS $550.00
After SEPTEMBER 13, 2000 Min. will be $750.00
Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11.

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TITLE	DVA	☐ Delete
NAME	ROSENBACH, DEAN J	
STREET ADDRESS	~~500 S AUSTRALIAN AVE~~	
CITY-ST-ZIP	~~W PALM BCH FL~~	
TITLE	S	☒ Delete
NAME	~~DUNKEL, GARY M.~~	
STREET ADDRESS	~~500 S AUSTRALIAN AVE.~~	
CITY-ST-ZIP	~~W PALM BEACH FL~~	
TITLE	DVP	☐ Delete
NAME	SILBER, LOUIS M	
STREET ADDRESS	~~500 S. AUSTRALIAN AVE.~~	
CITY-ST-ZIP	~~W PALM BCH FL~~	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D/P	☒ Change ☐ Addition
NAME	200003510732--3	
STREET ADDRESS	-12/21/00--01074--012	
CITY-ST-ZIP	****200.00 ****200.00	
TITLE		☐ Change ☐ Addition
NAME	LS	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D/V/S	☒ Change ☐ Addition
NAME		
STREET ADDRESS	1124 COUNTRY CLUB DRIVE	
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408	
TITLE		☐ Change ☐ Addition
NAME	200003510732--3	
STREET ADDRESS	-12/21/00--01074--013	
CITY-ST-ZIP	****550.00 ****550.00	
TITLE	D	☒ Change ☐ Addition
NAME		
STREET ADDRESS	1801-S.-AUSTRALIAN AVE., #201	
CITY-ST-ZIP	WEST PALM BEACH, FL 33409	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

CR2E034 (5/00)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Vice Pres. 9/10/00 (561) 659-3300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #