

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

1042

APPLICATION FOR REINSTATEMENT



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

APPROVED AND FILED

DOCUMENT # 628496

NOV 19 PM 4:10

1. Corporation Name
ALBERT J. ENDRUSCHAT, D.D.S., P.A.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
1708 N. FEDERAL HIGHWAY LAKE WORTH FL 33460
1708 N. FEDERAL HIGHWAY LAKE WORTH FL 33460



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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07/01/1979	
City & State		City & State		5. FEI Number	
Zip		Zip		59-1921721	
Country		Country		Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input 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)			
1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PST	ENDRUSCHAT, ALBERT J.	1708 N. FEDERAL HWY	LAKE WORTH FL
D	ENDRUSCHAT, ALBERT J.	1708 N. FEDERAL HWY	LAKE WORTH FL
			100002694551--8 -11/23/98--01146--005 ****150.00 ****150.00

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent		
ENDRUSCHAT, ALBERT J 1708 N FEDERAL HIGHWAY LAKE WORTH FL 33460		Name		
		Street Address (P.O. Box Number is Not Acceptable)		
		Suite, Apt. #, Etc.		
		City	State	Zip Code
			FL	

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: Albert J. Endruschat REGISTERED AGENT MUST SIGN

Date: 11/16/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No

NA N.E.D.U.S. (See other side for information of 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)(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: Albert J. Endruschat REGISTERED AGENT MUST SIGN

Date: 11/16/98 Daytime Phone #: 561-5850039

CR2E040 (9/98)

2012

Memorandum

Date: 11/16/98

To: Florida Department of State
Division of Corporations
ATTN: Mr. Shawn Logan

From: John Endruschat, D.D.S., P.A. by Albert J. Endruschat, D.D.S.

Albert J. Endruschat D.D.S.

Subject: not receiving notice for Registration of Corporation

file-Flacorp MSWorks on 166

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Shawn,

Per our conversation today enclosed is a check for \$150.00. I did not receive any form, communication or notice related to my corporation prior to the enclosed notice.