

APPLICATION  
FOR  
REINSTATEMENT



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

DOCUMENT # 645797

1. Corporation Name

Chartered Investment Research Corporation

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 NOV -6 AM 10: 29

Principal Place of Business

Mailing Address

777 N.W. 72nd Avenue, #2 J14  
Miami, Florida 33126

REINSTATEMENT

99-00

If above addresses are incorrect in any way, line through incorrect information and enter correction below

2. New Principal Office Address, If Applicable

460 W. Dilido Drive  
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

460 W. Dilido Drive  
Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida

November 20, 1979

5. FEI Number

59-1953925

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

City & State

Miami Beach, Florida

City & State

Miami Beach, Florida

Zip

33139

Country

US

Zip

33139

Country

US

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
STD P	Marsha Satuloff	460 W. Dilido Drive	Miami Beach, Florida 33139
			7000003496537--9 -12/12/00--01027--009 *****900.00 *****900.00

8. Name and Address of Current Registered Agent

Marsha Satuloff  
460 W. Dilido Drive  
Miami Beach, Florida 33139

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

Marsha Satuloff. REGISTERED AGENT MUST SIGN

Date 10/27/00

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.

CHARTERED INVESTMENT RESEARCH CORPORATION

SIGNATURE:

Marsha Satuloff President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

By: Marsha Satuloff, President

Date

Daytime Phone #

10/27/00 305-531-3941